# SCANNED AUG 0 9 2012

Return of Organization Exempt From Income Tax
Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung
benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements.

05/4 No. 1545 0047 Open to Public

		· · · · · · · · · · · · · · · · · · ·	inspection.
A For	the 2011 calendar year, or lax year beginning and endin	9	
B Check	C Name ol organization THE GLOBAL FUND TO FIGHT AIOS.	D Employer identific	cation number
	TUBERCULOSIS AND MALARIA	i	
= ,,,	Doing Business As	98 038	0092
	Number and street (or P.O. box if mail is not delivered to street address)  Room		
Te	THE CHPMIN DE BLAUCOUNET S		791 - 1700
	City or town, state or country, and ZIP + 4	G Gross receipts \$	4,271,261,633
	CO 1314 CONTUR CHICATON NO	H(a) Is this a group re	
pe	F Name and address of principal officer, GABRIEL JARAMILLO	for affiliates?	Yes X No
	SAME AS C ABOVE	H(b) Are all alliliates inc	
I Tay	exempt status: x 501(c)(3) 501(c)( ) ◀ (insert no.) 4947(a)(1) or	Taxani I	list (see Instructions)
.I Web	osite: WWW.THEGLOBALFUND.ORG	H(c) Group exemption	
			State of lenal domicile; 57
Part		Total of formation, was a	Table of icital sources, and
		FUND TO FIGHT ALOS	
[일 :	TUBERCULOSIS AND MALARIA (THE GLOBAL FUND) IS AN INDEPENDENT	,	<del>- · · · · · · · · · · · · · · · · · · ·</del>
Activities & Governance	Check this box  II the organization discontinued its operations or disposed of	more than 25% of the not as	cote
2 3	Number of voting members of the governing body (Part VI, line 1a)	3	20
8   3	Number of independent voting members of the governing body (Part VI, line 1b)	4	20
ν 5 ν 5	Total number of individuals employed in calendar year 2011 (Part V, line 2a)	5	
ءَ اڇُ	Total number of volunteers (estimate of nocessary)	6	<del></del>
	a Total unrelated business revenue Irom Part VIII. column (6) Che VED	70	0.
₹   ′	b Net unrelated business taxable income from Form 990 T, line 34	7b	0.
		T	· · · · · · · · · · · · · · · · · · ·
.	Contributions and grants (Part VIII, line 1h) AUG 0 7 2012	Prior Year 2,318,090,997.	Current Yoar 4 . 188 . 830 . 139 .
Rovanue 6	Continuorioris and grants (Part VIII, line In)	2,310,090,397.	4,188,830,139.
§ 3	Program service revenue (Part VIII, line 2g)		- · · · · · · · · · · · · · · · · · · ·
	CASINENTIF	149,684,398.	82,431,494. 0.
11			
12		2,467,775,395,	4,271,261,633.
13	, , , , , , , , , , , , , , , , , , ,	3,172,776,986,	2,728,069,018,
14			126 676 720
Expenses 16		107,056,130.	126,676,770.
ğ   "	ia Professional fundraising lees (Part IX, column (A), line 11e)  b Total fundraising expenses (Part IX, column (D), line 25)  41,529,013.	<del></del>	0.
ŭ		180,877,422,	181 000 610
17			181,099,630.
18	, , , , , , , , , , , , , , , , , , , ,	3,460,710,538.	3,035,845,418.
	Revenue less expenses, Subtract line 18 from line 12	<u> </u>	1,235,416,215.
A Ssets or 1d Balances 20	Total assets (Part X, line 16)	Beginning of Current Year 6, 244, 686, 554.	7,271,802,188,
劉21	·	4,745,469,211,	
· 22		1,499,217,343.	4,626,920,091.
Part I		1,499,217,343,	2,644,882,097.
	nallies of perjury, I declare that I have examined this return, including accompanying schedules and st	alamanic and to the best of my	knowledge and ballet it is
true, corr	ect, and complete. Declaration of prepar <u>er (othe</u> r flian officer) is based on all information of which prep	nater has any konviedan	knowicuge and belief, if is
		partir has any kind artinge.	<del></del>
Sign	Signature of officer of	Daie	<del>,</del>
Here	CHARLIE JOHNSON, CHIEF PINANCIAL OPPICER	07/31/	24.5
	Type or print name and title	<del>/-</del>	
	Print/Type preparer's name Preparer's signature	- Date Com	TI PIN
Paid	JENNIPER BECKER HARRIS Jennyer Lichtan	haa	P00183358
Preparer		Firm s EIN	91-1194016
Use Only		CHILL 2 CHIL	
•	BELLEVUE, WA 98004	Phone no. 425	454 4919
May the	IRS discuss this return with the preparer shown above? (see instructions)	1. 1000 110. 400	X Yes No
			ONI au i i NO

137001 01 23-12 LHA Fer Paperwork Reduction Act Notice, see the separate instructions. SEE SCHEDULE O FOR ORGANIZATION MISSION STATEMENT CONTINUATION

Form 990 (2011)

98-0380092

TUBERCULOSIS AND MALARIA

Pa	nt'III Statement of Program Service Accomplishments
	Check if Schedule O contains a response to any question in this Part III
1	Briefly describe the organization's mission:
	THE PURPOSE OF THE GLOBAL FUND IS TO ATTRACT, MANAGE AND DISBURSE
	ADDITIONAL RESOURCES THROUGH A NEW PUBLIC-PRIVATE PARTNERSHIP THAT
	WILL MAKE A SUSTAINABLE AND SIGNIFICANT CONTRIBUTION TO THE REDUCTION
	OF INFECTIONS, ILLNESS AND DEATH, THEREBY MITIGATING THE IMPACT CAUSED
2	Did the organization undertake any significant program services during the year which were not listed on
	the pnor Form 990 or 990-EZ?
	If "Yes," describe these new services on Schedule O.
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?
	If "Yes," describe these changes on Schedule O.
4	Describe the organization's program service accomplishments for each of its three largest program services, as measured by expenses.
	Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to
	others, the total expenses, and revenue, if any, for each program service reported.
4a	(Code. ) (Expenses \$ 2,825,375,374. including grants of \$ 2,592,193,535.) (Revenue \$ )
	PROVIDING GRANTS TO LOCALLY-DEVELOPED PROGRAMS TO PREVENT AND TREAT
	AIDS, TUBERCULOSIS AND MALARIA.
4b	(Code: ) (Expenses \$ 135,875,483. including grants of \$ 135,875,483. ) (Revenue \$ )
	PROVIDING CO-PAYMENT SUBSIDIES ON THE COST OF ANTI-RETROVIRAL DRUGS TO
	THE GRANT RECIPIENT'S BY MAKING CO-PAYMENTS TO PHARMACEUTICAL
	SUPPLIERS. REVENUE FROM AMFM DONORS IS RECOGNIZED TO THE EXTENT OF
	CO-PAYMENT EXPENDITURE MADE DURING THE YEAR. THE REMAINING FUNDS
	RECEIVED ARE TREATED AS DEFERRED REVENUE.
	\(\frac{1}{2}\)
4c	(Code) (Expenses \$
4d	Other program services (Describe in Schedule O.)
	(Expenses \$ including grants of \$ ) (Revenue \$ )
4e	Total program service expenses ▶ 2,961,250,857.

Page 3

	1990 (2011)		<u> </u>	ugo
Pa	rt IV Checklist of Required Schedules		r.,	Ι
	77.74.74		Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?	1	x	
•	If "Yes," complete Schedule A Is the organization required to complete Schedule B, Schedule of Contributors?	2	x	<del> </del>
2	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for	1	<del></del>	
3	public office? If "Yes," complete Schedule C, Part I	3		х
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect	-		
7	during the tax year? If "Yes," complete Schedule C, Part II	4		х
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
•	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		х
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
Ĭ	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		x
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			1
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7	l	х
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		x
9	Did the organization report an amount in Part X, line 21; serve as a custodian for amounts not listed in Part X; or provide			
	credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		х
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent	l		1
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		X
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, VIII, IX, or X			
	as applicable.	82.74 mp. 7	كنسخة	2500 500 2500 500
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
þ	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total	l		l
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
C	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total	١.,		"
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		х
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in	۱		x
_	Part X, line 16? If "Yes," complete Schedule D, Part IX  Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11d 11e		X
9	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses	116		<u> </u>
f	the organization's separate or consolidated infancial statements for the tax year include a roothole that addresses  the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	111		ж
122	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete	<del>                                     </del>	_	
120	Schedule D, Parts XI, XII, and XIII	12a		x
Ь	Was the organization included in consolidated, independent audited financial statements for the tax year?			
_	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI, XII, and XIII is optional	12b		х
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		Х
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	Х	
b	5			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			
	or more? If "Yes," complete Schedule F, Parts I and IV	14b	Х	<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization	l		
	or entity located outside the United States? If "Yes," complete Schedule F, Parts II and IV	15	Х	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals			Ų.
	located outside the United States? If "Yes," complete Schedule F, Parts III and IV	16		<u> </u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,	47		x
10	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I  Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	17		<del>-</del>
18	1c and 8a? If "Yes," complete Schedule G, Part II	18		х
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"	_ <u>`</u>		
	complete Schedule G, Part III	19		х
<b>20</b> a	The state of the s	<b>20</b> a		х
	•	_	_	-

b If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?

TUBERCULOSIS AND MALARIA Form 990 (2011) TUBERCULOSIS AND MALARIA
Part V Checklist of Required Schedules (continued)

			Yes	No
21	Did the organization report more than \$5,000 of grants and other assistance to any government or organization in the			
	United States on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		Х
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX,			
	column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		Х
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current		i	
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	ŀ		
	Schedule J	23	Х	
24a	•		ŀ	
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete	i		
	Schedule K. If "No", go to line 25	24a		х
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary penod exception?	24b		
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		
d	· · · · · · · · · · · · · · · · · · ·	24d		
25a				
	disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		х
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and			
	that the transaction has not been reported on any of the organization's pnor Forms 990 or 990-EZ? If "Yes," complete		ŀ	
	Schedule L, Part I	25b		Х
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified			
	person outstanding as of the end of the organization's tax year? If "Yes," complete Schedule L, Part II	26		Х
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			
	of any of these persons? If "Yes," complete Schedule L, Part III	27	44.75.44	X (1)
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV			
	instructions for applicable filing thresholds, conditions, and exceptions):		i igi Ci	
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a		x
ь	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		Α
С	·			x
	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		X
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation	30		х
04	contributions? If "Yes," complete Schedule M	30		
31	Did the organization liquidate, terminate, or dissolve and cease operations?	31		x
20	If "Yes," complete Schedule N, Part I			
32	Schedule N, Part II	32		x
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
33	sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		x
34	Was the organization related to any tax-exempt or taxable entity?			
•	If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1	34		х
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		х
b	Did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of			
-	section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		x
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?		$\neg \uparrow$	
	If "Yes," complete Schedule R, Part V, line 2	36		x
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization	П		
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37	[	x
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19?		$\Box$	
	Note. All Form 990 filers are required to complete Schedule O	38	х	

Pai	Tt V Statements Regarding Other IRS Filings and Tax Compliance Check if Schedule O contains a response to any question in this Part V			
	Check if Schedule O contains a response to any question in this Part V			
	Check if Consider C Contains a respective to any question in this real t			
			Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable			
ь	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	7		
c	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming	1	•	•
_	(gambling) winnings to prize winners?	1c		
22	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,			
	filed for the calendar year ending with or within the year covered by this return 2a		1	
	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b		
D	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)	1		┢
0-	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		x
3a		3b		<del></del> -
	·	30		
<b>4a</b>	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a	١		
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a	х	
b	If "Yes," enter the name of the foreign country:  SWITZERLAND			
	See instructions for filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts.			
5a	Was the organization a party to a prohibited tax shelter transaction at any time duning the tax year?	<u>5a</u>		X
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		X
	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c		
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit			
	any contributions that were not tax deductible?	6a	ļ	Х
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts			
	were not tax deductible?	6b		
7	Organizations that may receive deductible contributions under section 170(c).	<u></u>		
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		X
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required			
	to file Form 8282?	7c		X
d	If "Yes," indicate the number of Forms 8282 filed during the year			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		X
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?	7f		х
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		
8	Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting		3	
	organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?	8		
9	Sponsoring organizations maintaining donor advised funds.			
а	Did the organization make any taxable distributions under section 4966?	9a		
b	Did the organization make a distribution to a donor, donor advisor, or related person?	9b		
10	Section 501(c)(7) organizations. Enter:			
а	Initiation fees and capital contributions included on Part VIII, line 12			
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities	1		
11	Section 501(c)(12) organizations. Enter:	1		
а	Gross income from members or shareholders			
b	Gross income from other sources (Do not net amounts due or paid to other sources against	1		
-	amounts due or received from them.)			
122	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b			
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1		
	Is the organization licensed to issue qualified health plans in more than one state?	13a	$\Box$	
u	Note. See the instructions for additional information the organization must report on Schedule O.			
h	Enter the amount of reserves the organization is required to maintain by the states in which the			
D	organization is licensed to issue qualified health plans			
^	Enter the amount of reserves on hand	1		
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u>x</u>

**b** If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O

14b

X

6

**7**a

THE GLOBAL FUND TO FIGHT AIDS TUBERCULOSIS AND MALARIA Form 990 (2011) Page 6 Governance, Management, and Disclosure For each 'Yes' response to lines 2 through 7b below, and for a "No" response Part VI to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions. Check if Schedule O contains a response to any question in this Part VI Section A. Governing Body and Management Yes No 1a Enter the number of voting members of the governing body at the end of the tax year 1a If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O. 20 b Enter the number of voting members included in line 1a, above, who are independent Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other 2 officer, director, trustee, or key employee? Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person? 4 Did the organization make any significant changes to its governing documents since the pnor Form 990 was filed? Did the organization become aware during the year of a significant diversion of the organization's assets? 5

b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or	i	i	
	persons other than the governing body?	7b		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	در_		L
а	The governing body?	8a	х	
b	Each committee with authority to act on behalf of the governing body?	8b	х	L
9	is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the			l
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		
Sec	etion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)			
			Yes	Ī
10a	Did the organization have local chapters, branches, or affiliates?	10a		
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,			l
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b		
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a		
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.	1, 1, 16s	数数が	Ą
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	х	
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Х	
C	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe			
	in Schedule O how this was done	12c	x	

7a Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or

13 Did the organization have a written whistleblower policy? x Did the organization have a written document retention and destruction policy? 14 Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision? 15a The organization's CEO, Executive Director, or top management official x 15b Other officers or key employees of the organization If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions). 16a Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year? 16a b If "Yes," did the organization follow a written policy or procedure requining the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's 16b exempt status with respect to such arrangements?

Section	C.	Disc	osure

Did the organization have members or stockholders?

more members of the governing body?

17	List the states with which a copy of this Form 990 is required to be filed AL, AK, AZ, AR, CA, CO, CT, DE, FL, GA, HI, ID
	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) available
	for public inspection. Indicate how you made these available. Check all that apply.
	Own website Another's website X Upon request
19	Describe in Schedule O whether (and if so, how), the organization made its governing documents, conflict of interest policy, and financial

statements available to the public during the tax year.

20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization:
	CHARLIE JOHNSON - 41-58-791-1249
	CURVEY DE DYANDONYER C. COMMIN. CU. 1214 CHARGED AND

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TUBERCULOSIS AND MALARIA

RanteVIII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a respons	e to any question in this Part VII	

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employee."
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

(A) Name and Title	(B) Average hours per week	(do		Pos heck ss pe	tion more	than	one han	(D) Reportable compensation from	(E) Reportable compensation from related	(F) Estimated amount of other
	(describe hours for related organizations in Schedule O)	Individual trustae or director	Institutional trustee	Officer	Key employee	Highest compensated employee	Former	the organization (W-2/1099-MISC)	organizations (W-2/1099-MISC)	compensation from the organization and related organizations
(1) DR REINHARD TITTEL-GRONEFELD								_	_	_
BOARD MEMBER	10.00	X	<u> </u>	<u> </u>		_	_	0.	0.	0.
(2) SHAUN MELLORS		_				•				
BOARD MEMBER	10,00	X			<u> </u>	_	_	0.	0.	0.
(3) ALVARO BERMEJO	10.00									
BOARD MEMBER	10.00	X			$\vdash$		_	0.	0.	0.
(4) DR CHEICK TIDIANE TALL	10.00	_			l		ŀ	0.	0.	0
BOARD MEMBER	10.00	Х	$\vdash$	-				0.	0.	0.
(5) MOINAFOURAHA AHMED	10.00	x						0.	0.	0.
BOARD MEMBER	10.00	┢	$\vdash$		<u> </u>		_	· · · · · · · · · · · · · · · · · · ·	0.	
(6) DR VIOREL SOLTAN	10.00	x						٥.	0.	0.
(7) DR ABDULKARIM YEHIA RASAE	10.00	┢	H			$\vdash$	<u> </u>	0,	0.	
BOARD MEMBER	10.00	x						٥.	0.	0.
(8) KRISTIAN SCHMIDT	10.00	Ĥ	Н	-		$\vdash$				
BOARD MEMBER	10,00	x						٥.	0.	0.
(9) PATRICE DEBRE	<del></del>							- •		
BOARD MEMBER	10.00	x						0.	0.	0.
(10) ELISABETTA BELLONI		-								,
BOARD MEMBER	10.00	х						0.	0.	0.
(11) MASAKI NOKE										
BOARD MEMBER	10.00	x				i		0.	0.	0.
(12) DR LESLIE RAMSAMMY										
BOARD MEMBER	10.00	х						0.	0.	0.
(13) DR MARTIN GREENE										
BOARD MEMBER	10.00	x		ļ				0.	0.	0.
(14) DR ERNEST LOEVINSOHN										
BOARD MEMBER	10.00	x						0.	0.	0.
(15) DR BRIAN BRINK										
BOARD MEMBER	10.00	x		1				0.	0.	0.
(16) RAJENDRA MAHATO				1						
BOARD MEMBER	10.00	x						0.	0.	0.
(17) ERIC GOOSBY										
BOARD MEMBER	10.00	X						0.	0.	0.

98-0380092

Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (C) (A) (B) (D) (E) (F) Position Average Reportable Reportable Estimated Name and title (do not check more than one hours per compensation compensation amount of box, unless person is both an officer and a director/trustee) week from from related other (describe the organizations compensation hours for organization (W-2/1099-MISC) from the ndividual trustee or related nstitutional trustee (W-2/1099-MISC) organization organizations and related ın Schedule organizations O) (18) GEORGES MARIUS MOYEN BOARD MEMBER 10.00 X 0 0 (19) DR HUANG JIEFU BOARD MEMBER 10.00 0 0 0. (20) CARLTON EVANS BOARD MEMBER 10.00 0 0 0. (21) SIMON BLAND CHAIR OF THE BOARD 10.00 X 0 0 0. (22) DR MPHU RAMATLAPENG 0 VICE CHAIR OF THE BOARD 10.00 X 0 0. (23) ZUBAIR SHEIKH HASSAN CHIEF FINANCIAL OFFICER 50.00 X 265,606 0 188,189. (24) MARK EDINGTON DIRECTOR, COUNTRY PROGRAMS 50.00 X 0 173,199 264,979. (25) DR MICHEL KAZATCHKINE EXECUTIVE DIRECTOR 0 50.00 x 311,858 74,239. (26) DAVID CURRY FINANCE DIRECTOR 50.00 261,603 0 96,718. 1,012,266 0. 624,125. 1b Sub-total 0 c Total from continuation sheets to Part VII, Section A 2,538,459 1,508,086. 3,550,725, 2,132,211. d Total (add lines 1b and 1c) Total number of individuals (including but not limited to those listed above) who received more than \$100,000 of reportable 603 compensation from the organization Yes No Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on وتو ما او : X line 1a? If "Yes," complete Schedule J for such individual 3

3 Did the organization list any former officer, director, or trustee, key employee, or highest compensated employee on line 1a? If "Yes," complete Schedule J for such individual

4 For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? If "Yes," complete Schedule J for such individual

4 X

Did any person listed on line 1a receive or accrue compensation from any unrelated organization or individual for services rendered to the organization? If "Yes," complete Schedule J for such person

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization. Report compensation for the calendar year ending with or within the organization's tax year.

(A) Name and business address	(B) Description of services	(C) Compensation
PRICEWATERHOUSECOOPERS		<u> </u>
, GENEVA, SWITZERLAND	LOCAL FUND AGENT FEES	36,344,456.
CARLSON WAGONLIT TRAVEL		
, GENEVA, SWITZERLAND	TRAVEL AGENT SERVICES	13,602,373.
KPMG LLP		
, GENEVA, SWITZERLAND	LOCAL FUND AGENT FEES	9,943,802.
SWISS CENTRE OF INTERNATIONAL HEALTH		
, GENEVA, SWITZERLAND	LOCAL FUND AGENT FEES	6,246,697.
UNITED NATIONS OFFICE FOR PROJECT SERVICES		
, GENEVA, SWITZERLAND	LOCAL FUND AGENT FEES	5,651,845.
2 Total number of independent contractors (including but not limited \$100,000 of compensation from the organization	to those listed above) who received more than 143	1 11 12 12 1

98-0380092

Form 990 (2011) Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued) (F) (C) (D) (E) (B) **Position** Reportable Reportable Estimated Name and title Average (check all that apply) compensation compensation amount of hours from from related other per week the organizations compensation Highest compensated employee (W-2/1099-MISC) organization from the individual trustee or director (W-2/1099-MISC) organization institutional trustee and related Key employee organizations Officer (27) HEATHER ALLAN 218,701 0 373,213. DIRECTOR, CORPORATE SERVICES 50.00 x (28) RIPAT ATUN 50.00 275,861 0 X 185,812. DIRECTOR, STRATEGY, POLICY AND PERFO (29) DR DEBREWORK ZEWDIE 50.00 0 331,201 107,982. DEPUTY EXECUTIVE DIRECTOR x (30) GULEN NEWTON x 0 50.00 261,133 151,379. DIRECTOR LEGAL (31) JOSE-MARIA DE HEREDIA 0 417,998 95,688. DIRECTOR, IT 50.00 X (32) DR OLUSOJI ADEYI X 274,097 0 150,124. DIRECTOR, AMFM 50.00 (33) DR ELMAR VINH-THOMAS 0 DIRECTOR, AUDIT OIG 50.00 X 251,453. 170,107. (34) STEFAN EMBLAD DIRECTOR, RESOURCE MOBILIZATION 50.00 X 267,136 0 127,316. (35) DHARSHANA DE MEL 240,879 DIRECTOR, STRATEGY AND POLICY UNIT 0 50.00 X 146,465. 2,538,459 1,508,086. Total to Part VII, Section A, line 1c

TUBERCULOSIS AND MALARIA

1 a Fodented campaigns   1a   1b   1b   1c   1c   1c   1c   1c   1c	1			(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514
Business Code	ts	1 a	Federated campaigns 1a				
Business Code	iran		· -	7			
Business Code	P, G			7			
Business Code	第月			7			
Business Code	S,E	e		3.			
Business Code	ë	f					
Business Code			similar amounts not included above 1f 706,322,341	L.			
Business Code	달의	ç	Noncash contributions included in lines 1a-1f \$	7			
Business Code	မှု လ	ŀ	Total. Add lines 1a-1f	4,188,830,139.			
Total, Add lines 2a2f  3 Investment income (including dividends, interest, and other similar amounts)  4 Income from investment of tax exempt bond proceeds  5 Royalties  (i) Real (ii) Personal  6 a Gross rents  b Less: rental expenses  c Rental income or (loss)  d Net rental income or (loss)  7 a Gross amount from sales of assets other than inventory  b Less: cost or other basis and sales expenses  c Gain or (loss)  2,217,479.  d Net gain or (loss)  4 Net gain or (loss)  5 Royalties  0 Cain or (loss)  2,217,479.  4 Net gain or (loss)  5 Net income or (loss)  6 A Gross income from fundraising events (not including \$			Business Coo	le		·	
Total, Add lines 2a2f  3 Investment income (including dividends, interest, and other similar amounts)  4 Income from investment of tax exempt bond proceeds  5 Royalties  (i) Real (ii) Personal  6 a Gross rents  b Less: rental expenses  c Rental income or (loss)  d Net rental income or (loss)  7 a Gross amount from sales of assets other than inventory  b Less: cost or other basis and sales expenses  c Gain or (loss)  2,217,479.  d Net gain or (loss)  4 Net gain or (loss)  5 Royalties  0 Cain or (loss)  2,217,479.  4 Net gain or (loss)  5 Net income or (loss)  6 A Gross income from fundraising events (not including \$	9	<b>2</b> a					
Total, Add lines 2a2f  3 Investment income (including dividends, interest, and other similar amounts)  4 Income from investment of tax exempt bond proceeds  5 Royalties  (i) Real (ii) Personal  6 a Gross rents  b Less: rental expenses  c Rental income or (loss)  d Net rental income or (loss)  7 a Gross amount from sales of assets other than inventory  b Less: cost or other basis and sales expenses  c Gain or (loss)  2,217,479.  d Net gain or (loss)  4 Net gain or (loss)  5 Royalties  0 Cain or (loss)  2,217,479.  4 Net gain or (loss)  5 Net income or (loss)  6 A Gross income from fundraising events (not including \$	و کَ	t					
Total, Add lines 2a2f  3 Investment income (including dividends, interest, and other similar amounts)  4 Income from investment of tax exempt bond proceeds  5 Royalties  (i) Real (ii) Personal  6 a Gross rents  b Less: rental expenses  c Rental income or (loss)  d Net rental income or (loss)  7 a Gross amount from sales of assets other than inventory  b Less: cost or other basis and sales expenses  c Gain or (loss)  2,217,479.  d Net gain or (loss)  4 Net gain or (loss)  5 Royalties  0 Cain or (loss)  2,217,479.  4 Net gain or (loss)  5 Net income or (loss)  6 A Gross income from fundraising events (not including \$	Sell	c	:				
Total, Add lines 2a2f  3 Investment income (including dividends, interest, and other similar amounts)  4 Income from investment of tax exempt bond proceeds  5 Royalties  (i) Real (ii) Personal  6 a Gross rents  b Less: rental expenses  c Rental income or (loss)  d Net rental income or (loss)  7 a Gross amount from sales of assets other than inventory  b Less: cost or other basis and sales expenses  c Gain or (loss)  2,217,479.  d Net gain or (loss)  4 Net gain or (loss)  5 Royalties  0 Cain or (loss)  2,217,479.  4 Net gain or (loss)  5 Net income or (loss)  6 A Gross income from fundraising events (not including \$	ĕ ă  ĕ ă	c	I				
Total, Add lines 2a2f  3 Investment income (including dividends, interest, and other similar amounts)  4 Income from investment of tax exempt bond proceeds  5 Royalties  (i) Real (ii) Personal  6 a Gross rents  b Less: rental expenses  c Rental income or (loss)  d Net rental income or (loss)  7 a Gross amount from sales of assets other than inventory  b Less: cost or other basis and sales expenses  c Gain or (loss)  2,217,479.  d Net gain or (loss)  4 Net gain or (loss)  5 Royalties  0 Cain or (loss)  2,217,479.  4 Net gain or (loss)  5 Net income or (loss)  6 A Gross income from fundraising events (not including \$	읈	e					
3 Investment income (including dividends, interest, and other similar amounts) 4 Income from investment of tax exempt bond proceeds 5 Royalties 6 a Gross rents b Less: rental expenses c Rental income or (loss) 7 a Gross amount from sales of 1 (i) Securities (ii) Other 2,217,479. b Less: cost or other basis and sales expenses c Gain or (loss) d Net ental income or (loss) 7 a Gross mount from sales of 1 (i) Securities (ii) Other 2,217,479. b Less: cost or other basis and sales expenses o 0. c Gain or (loss) d Net gan or (loss)  b Less: cost or other basis and sales expenses o 0. c Gain or (loss)  c Rent IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities. See Part IV, line 19 b Less: cost of goods sold c Net income or (loss) from sales of inventory Miscellaneous Revenue Business Code  11 a b C C C C C C C C C C C C C C C C C C	<u>-</u>	f	All other program service revenue				
Second   S	$\perp$		Total. Add lines 2a-2f				
## Income from investment of tax-exempt bond proceeds   Royalties	1	3	Investment income (including dividends, interest, and				
Second   S	- 1			80,214,015.	ļ <u> </u>		80,214,015.
(i)   Personal   (ii)   Personal   (iii)   Personal   (iii)   Personal   (iii)   Personal   (iiii)   Personal   (iiii)   Personal   (iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii		4					
6 a Gross rents b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses 0, 2, 217, 479.  8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 a b Less: direct expenses b c Net income or (loss) from garning activities. See Part IV, line 19 b Less: cost of goods sold b c Net income or (loss) from sales of inventory  Miscellaneous Revenue  11 a b C A III other revenue e Total. Add lines 11a-11d b C A III other revenue e Total. Add lines 11a-11d Total revenue. See instructions.  1 a C ON (MILL)  1 a C ON (MILL)  1 a C ON (MILL)  4 a C ON (MILL)  5 a C ON (MILL)  6 a Gross sales of inventory less returns and allowances		5					
b Less: rental expenses c Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss)  8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 a b Less: direct expenses b c Net income or (loss) from garning activities. See Part IV, line 19 a b Less: cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  11 a b c d All other revenue e Total. Add lines 11a-11d Total revenue. See instructions.				-	1		
C Rental income or (loss) d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses 0. c Gain or (loss) d Net gain or (loss) 2, 217, 479.  8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses b Less: direct expenses c Net income or (loss) from gaming activities. See Part IV, line 19 b Less: cost of goods sold c All other revenue e Total. Add lines 11a-11d b Loss income structions.  10 a Gross all come from gaming activities b Less: cost of goods sold b Less: cost of goods sold c All other revenue e Total. Add lines 11a-11d b Less: cost of goods so inventory  10 a Gross analytic income or (loss) from sales of inventory  Miscellaneous Revenue  11 a b b Less: cost of goods sold b Less: cost of goods sold b Less: cost of goods sold c All other revenue e Total. Add lines 11a-11d b Less: cost of goods c All other revenue e Total reve				4	ł		
d Net rental income or (loss) 7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses 0. c Gain or (loss) d Net gain or (loss)  8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 a b Less: direct expenses b c Net income or (loss) from fundraising events 9 a Gross income from gaming activities. See Part IV, line 19 a b Less: direct expenses b c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances and allowances and allowances and allowances and allowances Business Code  11 a b c d All other revenue e Total, Add lines 11a-11d				_			
7 a Gross amount from sales of assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss) d Net gain or (loss) 2,217,479. d Net gain or (loss)  8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 b Less: direct expenses c Net income or (loss) from fundraising activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities 10 a Gross sales of inventory, less returns and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a b c d All other revenue e Total, Add lines 11a-11d Total revenue. See instructions.			•		 		<u> </u>
assets other than inventory b Less: cost or other basis and sales expenses c Gain or (loss)					<del>-</del>		1
b Less: cost or other basis and sales expenses 0. c Gain or (loss) 2,217,479. d Net gain or (loss) from fundraising events or contributions reported on line 1c). See Part IV, line 18 a		7 a	<del></del>				
and sales expenses			,	-∤			
C Gain or (loss)  d Net gain or (loss)  8 a Gross income from fundraising events (not including \$				}			
d Net gain or (loss)	- 1	_	and sales expenses	-			
8 a Gross income from fundraising events (not including \$ of contributions reported on line 1c). See Part IV, line 18 a b. Less: direct expenses b. C. Net income or (loss) from fundraising events	- 1			2 217 479			2 217 479
including \$ of contributions reported on line 1c). See Part IV, line 18 b	- 1						
c Net income or (loss) from fundraising events  9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a b c d All other revenue e Total. Add lines 11a-11d  12 Total revenue. See instructions.  4 , 271 , 261 , 633 . 0 . 0 . 82 , 431 , 494 .	2	0 6		l i	1		
c Net income or (loss) from fundraising events  9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a b c d All other revenue e Total. Add lines 11a-11d  12 Total revenue. See instructions.  4 , 271 , 261 , 633 . 0 . 0 . 82 , 431 , 494 .	ا ڇ			3			
c Net income or (loss) from fundraising events  9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a b c d All other revenue e Total. Add lines 11a-11d  12 Total revenue. See instructions.  4 , 271 , 261 , 633 . 0 . 0 . 82 , 431 , 494 .	ĕ		D-4 IV In- 40		P		
c Net income or (loss) from fundraising events  9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances a b Less: cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a b c d All other revenue e Total. Add lines 11a-11d  12 Total revenue. See instructions.  4 , 271 , 261 , 633 . 0 . 0 . 82 , 431 , 494 .	£	E					
9 a Gross income from gaming activities. See Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances	0						
Part IV, line 19 b Less: direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a b c d All other revenue e Total. Add lines 11a-11d Total revenue. See instructions.  4,271,261,633. 0. 0. 82,431,494.	1						
b Less: direct expenses c Net income or (loss) from gaming activities  10 a Gross sales of inventory, less returns and allowances and allowances b Less: cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a b c d All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions.  b Less: direct expenses b Less: direct							
10 a Gross sales of inventory, less returns and allowances	- 1	t	Less: direct expenses b				
and allowances		c	Net income or (loss) from gaming activities				
b Less: cost of goods sold c Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a b c d All other revenue e Total. Add lines 11a-11d 12 Total revenue. See instructions.  4,271,261,633.  0. 0. 82,431,494.		10 a	Gross sales of inventory, less returns				
C Net income or (loss) from sales of inventory  Miscellaneous Revenue  Business Code  11 a  b  C  d All other revenue  e Total. Add lines 11a-11d  12 Total revenue. See instructions.  4,271,261,633.  0.  0.  82,431,494.			and allowances a	_			ļ
Miscellaneous Revenue	l	b	Less: cost of goods sold b				
11 a	_ ↓						
b	Ļ		Miscellaneous Revenue Business Cod	e			
c d All other revenue e Total. Add lines 11a-11d		11 a	·				ļ
e Total. Add lines 11a-11d  12 Total revenue. See instructions.  4,271,261,633.  0.  0.  82,431,494.	l	b		-	•		<u> </u>
e Total. Add lines 11a-11d  12 Total revenue. See instructions.  4,271,261,633.  0.  0.  82,431,494.		C					
12 Total revenue. See instructions. 4,271,261,633. 0. 0. 82,431,494.		d			<del></del>		ı
132009			·	A 271 261 622			92 421 404
F1000 2920 1700 1	13200	9	Total revenue. See instructions.	14,2/1,201,033.	0.	0.	

### TUBERCULOSIS AND MALARIA

# Part IX Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns. All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

comp	olete columns (B), (C), and (D).				
	Check if Schedule O contains a respon-			(C)	(D)
Do 1 7b,	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses
1	Grants and other assistance to governments and				
	organizations in the United States. See Part IV, line 21				
2	Grants and other assistance to individuals in				
	the United States. See Part IV, line 22				
3	Grants and other assistance to governments,				
	organizations, and individuals outside the				
	United States. See Part IV, lines 15 and 16	2,728,069,018.	2,728,069,018.		
4	Benefits paid to or for members				
5	Compensation of current officers, directors,			660 400	
	trustees, and key employees	3,540,367.	2,093,065.	669,129.	778,173,
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
	persons described in section 4958(c)(3)(B)				
7	Other salanes and wages	91,596,590.	54,151,904.	17,311,756.	20,132,930
8	Pension plan accruals and contributions (include				
	section 401(k) and section 403(b) employer contributions)		40.555.55		
9	Other employee benefits	31,539,813.	18,646,337.	5,961,025.	6,932,451,
10	Payroll taxes				
11	Fees for services (non-employees):				
а	Management	19,462,132.	14,596,600.	1,946,213.	2,919,319,
þ	Legal	663,125.	497,343.	66,313.	99,469
C	Accounting			- ""	
d	Lobbying				
е	Professional fundraising services. See Part IV, line 17				
f	Investment management fees				
g	Other	1,708,407.	1,281,305.	170,841.	256,261,
12	Advertising and promotion				
13	Office expenses	20,121,359.	15,091,021.	2,012,134.	3,018,204.
14	Information technology	14,667,178.	11,000,384.	1,466,718.	2,200,076.
15	Royalties	, <del> </del>			
16	Occupancy	12,027,170.	9,020,377.	1,202,718.	1,804,075.
17	Travel	16,589,796.	12,442,347.	1,658,979.	2,488,470.
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials				
19	Conferences, conventions, and meetings	5,922,348.	4,441,761.	592,234.	888,353.
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	287,488.	287,488.		
23	Insurance	74,879.	56,159.	7,488.	11,232.
24	Other expenses. Itemize expenses not covered above. (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	LOCAL FUND AGENT FEES	76,522,380.	76,522,380.		
b	CNTRY COORD, MECH, FUND	5,209,258.	5,209,258.		
С	UNCOLLECTIBLE CONTR.	3,928,000.	3,928,000.		
d	TRUSTEE FEES	2,700,000.	2,700,000.		
е	All other expenses	1,216,110.	1,216,110.		
25	Total functional expenses. Add lines 1 through 24e	3,035,845,418.	2,961,250,857.	33,065,548.	41,529,013.
26	Joint costs. Complete this line only if the organization				
	reported in column (B) joint costs from a combined	}			
	educational campaign and fundraising solicitation.				
	Check here if following SOP 98-2 (ASC 958-720)				
1320 10	0 01-23-12				Form <b>990</b> (2011)

Part X | Balance Sheet (A) (B) Beginning of year End of year 19,816,131. 42,318,858. Cash - non-interest-bearing 5,288,462,521, 5,402,174,619. 2 Savings and temporary cash investments 244,196,455. 1,215,706,009. 3 Pledges and grants receivable, net Accounts receivable, net ... Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees. Complete Part II of Schedule L ..... Receivables from other disqualified persons (as defined under section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and sponsoring organizations of section 501(c)(9) voluntary 6 employees' beneficiary organizations (see instructions) 648,870,665, 542,475,979. Notes and loans receivable, net Inventories for sale or use 8 3,841,014. 7,369,493. Prepaid expenses and deferred charges 10a Land, buildings, and equipment: cost or other 659,000 basis. Complete Part VI of Schedule D 10a 100,000 559,000. b Less: accumulated depreciation 10b 10c 39,499,768. 11 60,106,718. Investments - publicly traded securities 11 12 Investments - other securities. See Part IV, line 11 12 13 Investments - program-related. See Part IV, line 11 13 1,091,512. Intangible assets .. ... 14 14 15 15 Other assets. See Part IV, line 11 .... 6,244,686,554 7,271,802,188, 16 Total assets. Add lines 1 through 15 (must equal line 34) 111,617,275, 159,132,104. 17 17 Accounts payable and accrued expenses . . . . . . 4,427,696,199. 4,389,098,815. 18 18 Grants payable ..... 206,155,737, 19 78,689,172. Deferred revenue ... ... ... 19 20 20 Tax-exempt bond liabilities 21 21 Escrow or custodial account liability. Complete Part IV of Schedule D Liabilities Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons. Complete Part II of Schedule L 23 23 Secured mortgages and notes payable to unrelated third parties 24 24 Unsecured notes and loans payable to unrelated third parties Other liabilities (including federal income tax, payables to related third parties, and other liabilities not included on lines 17-24). Complete Part X of Schedule D 4,745,469,211. 4,626,920,091. Total liabilities. Add lines 17 through 25 Organizations that follow SFAS 117, check here lines 27 through 29, and lines 33 and 34. Net Assets or Fund Balances 1,485,718,635 2,627,784,097. Unrestricted net assets 27 13,448,708, 17,048,000. 28 Temporanly restricted net assets 50,000 50,000. 29 Permanently restricted net assets Organizations that do not follow SFAS 117, check here complete lines 30 through 34. 30 Capital stock or trust principal, or current funds 31 Paid-in or capital surplus, or land, building, or equipment fund Retained earnings, endowment, accumulated income, or other funds 32 1,499,217,343 2,644,882,097. 33 Total net assets or fund balances .. .... .. 6,244,686,554, 7,271,802,188. Total liabilities and net assets/fund balances

Form **990** (2011)

Form **990** (2011)

⊢orm	1990 (2011) TOBERCOLOSIS AND MALIARIA	20-030003		Pa	ge ız
Pa	rt XI Reconciliation of Net Assets				
	Check if Schedule O contains a response to any question in this Part XI				х
1	Total revenue (must equal Part VIII, column (A), line 12)	1	4,271		_
2	Total expenses (must equal Part IX, column (A), line 25)	2	3,035		•
3	Revenue less expenses. Subtract line 2 from line 1	3	1,235		
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	1,499		
5	Other changes in net assets or fund balances (explain in Schedule O)	5	<89	,751	,461.
6	Net assets or fund balances at end of year. Combine lines 3, 4, and 5 (must equal Part X, line 33, column (B))	6	2,644	,882	,097.
Pa	rt XII Financial Statements and Reporting				
	Check if Schedule O contains a response to any question in this Part XII	•			لتا
				Yes	No
1	Accounting method used to prepare the Form 990:  Cash  Accrual  Other				1
	If the organization changed its method of accounting from a pnor year or checked "Other," explain in Schedule	e O.			
<b>2</b> a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		X
b	Were the organization's financial statements audited by an independent accountant?	·	2b	Х	
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the	e audit,			
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X	
	If the organization changed either its oversight process or selection process during the tax year, explain in Sch	edule O.	1 .		. ∤
d	If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issue	ed on a			.
	separate basis, consolidated basis, or both:				] !
	Separate basis X Consolidated basis Both consolidated and separate basis				
<b>3</b> a	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Si	ngle Audit			
	Act and OMB Circular A-133?		3a		Х
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required	ired audit			
	or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		3b		

### **SCHEDULE A**

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

# **Public Charity Status and Public Support**

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2011

Open to Public Inspection

Nam	e of t	he organizat	ion THE GLOBAL	FUND TO FIGHT AID	S,				- I	Employer i	dentificat	ion nu	mber
			TUBERCULOS	IS AND MALARIA	•				ľ	98-	-0380092		
Pai	ŧΤ	Reason	for Public Cha	r <b>ity Status</b> (All organi	zations mu	ıst comple	te this pa	rt.) See ins	tructions.				
The o	organ	ization is not a	a private foundation	because it is. (For lines	1 through	11, check	only one	box.)					
1		A church, co	envention of churche	s, or association of chui	rches desc	enbed in se	ection 170	)(b)(1)(A)(i	).				
2		A school des	scribed in section 1	<b>70(b)(1)(A)(ii).</b> (Attach Sc	chedule E.)								
3		A hospital or	a cooperative hosp	ıtal service organızation	described	ın s <b>ecti</b> or	170(b)(1)	(A)(iii).					
4		A medical re-	search organization	operated in conjunction	with a hos	spital desc	ribed in se	ection 170	<b>Xb)(1)(A)</b> (	iii). Enter th	ne hospita	l's nan	îe,
		city, and stat	te:										
5		An organizat	ion operated for the	benefit of a college or u	nıversity o	wned or o	perated b	y a govem	mental ur	nit describe	ed in	·	
		section 170	(b)(1)(A)(iv). (Comp	ete Part II.)									
6		A federal, sta	ate, or local governn	nent or governmental uni	rt descnbe	d in s <b>ecti</b> c	on 170(b)(	1)(A)(v).					
7	X	An organizat	ion that normally red	ceives a substantial part	of its supp	ort from a	governm	ental unit o	or from the	e general p	oublic desc	nbed	in
		section 170	( <b>b)(1)(A)(vi).</b> (Comple	ete Part II.)									
8		A community	trust described in s	section 170(b)(1)(A)(vi).	(Complete	Part II.)							
9		An organizat	ion that normally red	ceives: (1) more than 33	1/3% of its	s support 1	from contr	butions, r	nembersh	np fees, an	d gross re	ceipts	from
		activities rela	ited to its exempt fu	nctions - subject to certa	aın except	ons, and (	2) no more	e than 33	1/3% of rt	s support f	from gross	inves	tment
		income and	unrelated business t	axable income (less sec	tion 511 ta	ax) from bu	usinesses	acquired b	y the org	anization a	ifter June 3	30, 19 <sup>°</sup>	75.
		See section	509(a)(2). (Complet	e Part III.)									
10	_	An organizat	on organized and o	perated exclusively to te	st for pub	lic safety.	See s <b>ecti</b> o	o <b>n 509(</b> a)(4	4).				
11		An organizat	on organized and o	perated exclusively for t	he benefit	of, to perf	orm the fu	nctions of	, or to car	ry out the p	purposes o	of one	or
		more publich	y supported organiz	ations descnbed in secti	on 509(a)(	1) or section	on 509(a)(	2). See <b>se</b> e	ction 509	(a)(3). Che	ck the box	that	
		describes the	e type of supporting	organization and compl		_							
		a L Type	I b∟	ا Type II و	с — Тур	e III - Fund	ctionally in	tegrated		d L	Type III - 0	Other	
е		By checking	this box, I certify the	at the organization is not	controlled	d directly o	r indirecth	y by one o	r more dis	squalified p	ersons oth	her tha	ເກ
		foundation m	nanagers and other	than one or more publicl	y su <b>p</b> porte	ed organiza	ations des	cribed in s	ection 50	9(a)(1) or s	ection 509	9(a)(2).	
f		If the organiz	ation received a wri	tten determination from	the IRS th	at it is a Ty	pe I, Type	ll, or Type	e III				
		supporting o	rganization, check t	his box		•							
g		-		organization accepted a			•						
		-		lirectly controls, either a	lone or tog	ether with	persons of	descnbed	ın (ıi) and	(iii) below,		Yes	No
		_	_	upported organization?							11g(i)	-	
				n described in (i) above?				•			11g(ii)	ĭ	ļ
			=	person described in (i)					•		. <u>  11g(iii)</u>	<u> </u>	L
h		Provide the f	ollowing information	about the supported or	ganızatıon	(s).							
			<del></del>	(iii) Type of	L		[438 t -		1 (24)	o the			
(i) l		of supported	(ii) EIN	organization		organization sted in your		u notify the	Torganizati	on in col. i	(vii) Am		f
	orga	nizatıon		(described on lines 1-9	governing	document?	(i) of you		(i) organi U.S	zea in we j	sup	port	
				above or IRC section (see instructions))	Yes	No	Yes	No	Yes	No			
				(00000	103	No	103		100	<del>                                     </del>			
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# Schedule A (Form 990 or 990-EZ) 2011 TUBERCULOSIS AND MALARIA 98-0380092 | Part II | Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi) (Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III. If the organization fails to qualify under the tests listed below, please complete Part III.)

Sec	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received. (Do not						
	ınclude any "unusual grants.")	2916476393.	3742569371.	2579520303.	2318090997.	4188830139.	15745487203.
2	Tax revenues levied for the organ-						i e
	ization's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities				1		!
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	2916476393.	3742569371.	2579520303.	2318090997.	4188830139.	15745487203.
5	The portion of total contributions						
	by each person (other than a					•	
	governmental unit or publicly						
	supported organization) included					!	
	on line 1 that exceeds 2% of the						
	amount shown on line 11,		۸. ا				
	column (f)						416,879,759.
6	Public support. Subtract line 5 from line 4						15328607444.
Sec	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in) 🕨	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e) 2011	(f) Total
7	Amounts from line 4	2916476393.	3742569371.	2579520303.	2318090997.	4188830139.	15745487203.
8	Gross income from interest,						
	dividends, payments received on						
	securities loans, rents, royalties						
	and income from similar sources	240,501,530.	289,721,816.	150,403,105.	149,684,398.	80,214,015.	910,524,864.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income. Do not include gain						_
	or loss from the sale of capital						
	assets (Explain in Part IV.)						
11	Total support. Add lines 7 through 10						16656012067.
12	Gross receipts from related activities,	etc. (see instructi	ons)			12	
13	First five years. If the Form 990 is for	r the organization's	first, second, thir	d, fourth, or fifth ta	ex year as a sectio	n 501 (c)(3)	
	organization, check this box and stor	here					
	ction C. Computation of Publ						
14	Public support percentage for 2011 (	line 6, column (f) di	vided by line 11, o	olumn (f))		14	92.03 %
15	Public support percentage from 2010	Schedule A, Part	II, line 14		:	15	92.24 %
16a	33 1/3% support test - 2011. If the	organization did no	t check the box or	n line 13, and line	14 is 33 1/3% or m	ore, check this bo	
	stop here. The organization qualifies		_				. <b>• x</b>
b	33 1/3% support test - 2010. If the o				line 15 is 33 1/3%	or more, check th	is box
	and stop here. The organization qual				•		<b>▶</b> L
17a	10% -facts-and-circumstances tes						
	and if the organization meets the "fac					t IV how the organ	ızation
	meets the "facts-and-circumstances"	_	-		_		
b	10% -facts-and-circumstances tes						
	more, and if the organization meets the						, —
	organization meets the "facts-and-circ						<b>P</b>  -
18	Private foundation. If the organization	n did not check a	box on line 13, 16a	a, 16b, 17a, or 17b	o, check this box a	nd see instructions	

# Schedule A (Form 990 or 990-EZ) 2011 Part III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 9 of Part I or if the organization failed to qualify under Part II. If the organization fails to qualify under the tests listed below, please complete Part II.)

Sec	ction A. Public Support							
Cale	ndar year (or fiscal year beginning in) 🖊	(a) 2007	(b) 2008	(c) 2009	(d) 2010	(e)	2011	(f) Total
1	Gifts, grants, contributions, and							
	membership fees received. (Do not			ŀ				
	include any "unusual grants.")			ļ		ŀ		
2	Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose							
3	Gross receipts from activities that							
•	are not an unrelated trade or bus-				ļ			
	iness under section 513				ļ			
4	Tax revenues levied for the organ-				<u> </u>	<del> </del>		
7	ization's benefit and either paid to			ļ	ļ	ļ	J	
	or expended on its behalf							
_	The value of services or facilities		<del> </del>	<del></del>	<del>                                     </del>	+		· <del></del>
5	fumished by a governmental unit to the organization without charge							
6	Total. Add lines 1 through 5							
	Amounts included on lines 1, 2, and	<del></del>	Ì		<u> </u>	1		·
- 4	3 received from disqualified persons		1					
b	Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year							
c	: Add lines 7a and 7b							
	Public support (Subtract line 7c from line 6)					1		
	ction B. Total Support	<del></del>	t					
_	ndar year (or fiscal year beginning in)	(a) 2007	<b>(b)</b> 2008	(c) 2009	(d) 2010	(e)	2011	(f) Total
	Amounts from line 6		(2) = 0.00	(0/200	1072333	1 3		(1) Total
	Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources							
b	Unrelated business taxable income							
	(less section 511 taxes) from businesses							
	acquired after June 30, 1975					<u> </u>		
¢	Add lines 10a and 10b							
11	Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on							
12	Other income. Do not include gain or loss from the sale of capital			· " <u>.</u>				
13	assets (Explain in Part IV.) Total support (Add lines 9, 10c, 11, and 12)							<del></del>
	First five years. If the Form 990 is for	the organization's	s first, second, thir	d, fourth, or fifth to	ax vear as a section	on 501(c)	(3) organiza	ation.
-	check this box and stop here		, 2000119, 6111	, ,	,		, , , gai mad	▶[]
Sec	tion C. Computation of Publi	c Support Pe	rcentage					
_	Public support percentage for 2011 (li			column (fi)		15		%
	Public support percentage from 2010		=		• •	16		
	tion D. Computation of Inves					110		
_	Investment income percentage for 20			e 13 column (A)		17		30
				ie 13, coluitin (I))		18		<u>%</u> %
	Investment income percentage from 2			on line 14 and line	 15 is mars +5 == 1		and line 1"	
	33 1/3% support tests - 2011. If the	=					, and line 17	r is flot
	more than 33 1/3%, check this box an	=	-				22 1/20/	▶└
	33 1/3% support tests - 2010. If the	=						na 🛌
	line 18 is not more than 33 1/3%, chec		=				-	
<u> </u>	Private foundation. If the organization	i dia not check a	DOX OR line 14, 198	a, or 190, check th	is dox and see in	struction	<u>s</u>	

### SCHEDULE D

(Form 990)

Department of the Treasury Internal Revenue Service

# **Supplemental Financial Statements**

➤ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b. ➤ Attach to Form 990. ➤ See separate instructions. 2011
Copen to Public \*\*\*
Inspection

Name of the organization

THE GLOBAL FUND TO FIGHT AIDS,

TUBERCULOSIS AND MALARIA

Employer identification number 98-0380092

Pa	rt I Organizations Maintaining Donor Advise	d Funds or	Other Similar Fun	ds or Acc	counts. Complete if the
	organization answered "Yes" to Form 990, Part IV, line	6.			
		(a) Do	nor advised funds	(b) F	Funds and other accounts
1	Total number at end of year				
2	Aggregate contributions to (dunng year)				
3	Aggregate grants from (during year)		-		
4	Aggregate value at end of year				
5	Did the organization inform all donors and donor advisors in v	vriting that the	assets held in donor ad	vised funds	
	are the organization's property, subject to the organization's				Yes No
6	Did the organization inform all grantees, donors, and donor ad	_		be used only	/
•	for charitable purposes and not for the benefit of the donor of				
	impermissible private benefit?		, ,		Yes No
Pai	Ttill Conservation Easements. Complete if the org	anization ansv	wered "Yes" to Form 990	), Part IV, line	e 7.
1	Purpose(s) of conservation easements held by the organization				
•	Preservation of land for public use (e.g., recreation or ea		Preservation of an	histoncally ir	mportant land area
	Protection of natural habitat		Preservation of a c	=	
	Preservation of open space				
2	Complete lines 2a through 2d if the organization held a qualifi	ed conservati	on contribution in the for	m of a cons	ervation easement on the last
_	day of the tax year.				
	day of the tax your.			20	Held at the End of the Tax Year
а	Total number of conservation easements			2	
b	Total acreage restricted by conservation easements		••	2	to
C	Number of conservation easements on a certified historic stru	ucture include	d in (a)		lc
	Number of conservation easements included in (c) acquired a			cture	
_	listed in the National Register	,,		2	ad
3	Number of conservation easements modified, transferred, rele	eased, extingu	ished, or terminated by	the organiza	tion duning the tax
•	year ▶	<b>J</b>	,	J	· ·
4	Number of states where property subject to conservation eas	sement is loca	ted ►		
5	Does the organization have a written policy regarding the pen			_ of	
	violations, and enforcement of the conservation easements it				Yes No
6	Staff and volunteer hours devoted to monitoring, inspecting,		conservation easements	dunng the	year ▶
7	Amount of expenses incurred in monitoring, inspecting, and e				
8	Does each conservation easement reported on line 2(d) above				
	and section 170(h)(4)(B)(ii)?	•			Yes No
9	In Part XIV, describe how the organization reports conservation	on easements	in its revenue and exper	nse statemer	nt, and balance sheet, and
	include, if applicable, the text of the footnote to the organization				
	conservation easements.				
Pa	rt∰ Organizations Maintaining Collections of	Art, Histo	rical Treasures, or	Other Sin	nilar Assets.
	Complete if the organization answered "Yes" to Form 9	990, Part IV, III	ne 8.		
1a	If the organization elected, as permitted under SFAS 116 (AS	C 958), not to	report in its revenue stat	tement and b	palance sheet works of art,
	historical treasures, or other similar assets held for public exh	ibition, educat	tion, or research in furthe	erance of pub	blic service, provide, in Part XIV,
	the text of the footnote to its financial statements that describ	oes these item	s.		
b	If the organization elected, as permitted under SFAS 116 (AS	C 958), to rep	ort in its revenue stateme	ent and balai	nce sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed	lucation, or res	search in furtherance of p	oublic servic	e, provide the following amounts
	relating to these items:				
	(i) Revenues included in Form 990, Part VIII, line 1			. •	<b>\$</b>
	(ii) Assets included in Form 990, Part X	••	••	•	<b>\$</b>
2	If the organization received or held works of art, historical trea	sures, or othe	er similar assets for financ	cial gain, pro	vide
	the following amounts required to be reported under SFAS 11	6 (ASC 958) r	elating to these items:		
а	Revenues included in Form 990, Part VIII, line 1				<b>\$</b>
b	Assets included in Form 990, Part X				▶ \$

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	t III Organizations Maintaining C	Collections of A	rt Histor	rical Tr	Pasilisas	or Oth	er S	imila	r Asse	ts (conti	nued)
	Using the organization's acquisition, accessi										
3	-	on, and other record	is, check a	ny or the	lollowing the	al ale a s	sigiiiii	Cant	ise oi its	Collection	i items
	(check all that apply):				L						
a	Public exhibition	d			hange progr	ams					
b	Scholarly research	е	Ott	ner							
C	Preservation for future generations								D	+ V/\/	
4	Provide a description of the organization's co		_		_				se in Par	τ XIV.	
5	During the year, did the organization solicit o					ner sımıla	ır ass	ets		٦,,	┌,,
D	to be sold to raise funds rather than to be ma					<b>m</b> .	_		<u> </u>	Yes	No
Pai	t IV Escrow and Custodial Arran reported an amount on Form 990, Par		ete if the of	ganizatio	n answered	"Yes" to	rom	n 990,	Part IV,	line 9, or	
		·	J	-4			را مرد د	لم مراس			
<b>1</b> a	Is the organization an agent, trustee, custod	ian or other intermed	liary for co	ntribution	is or other a	ssets no	t incit	Jaea		٦٧	
	on Form 990, Part X?		0			•				<b>Ye</b> s	☐ No
b	If "Yes," explain the arrangement in Part XIV	and complete the to	llowing tab	le:			Г			AA	
	_						⊢	-		Amount	
C	Beginning balance						⊢	1c			
d	Additions duning the year						⊢	1d [	-		
е	Distributions during the year	•	•			•	ŀ	1e			
f	Ending balance					••	L	1f	- 1	1	1 1
	Did the organization include an amount on Fo		217				•	•	. ∟	<b>Ye</b> s	Ll No
Pai	If "Yes," explain the arrangement in Part XIV.			! A- F-	000 D- <del>-</del>	N/ line :	•••				<del></del>
Pai	t V Endowment Funds. Complete i	·			(c) Two year			hroo ve	are back	(=) Four	voore book
		(a) Current year	(b) Pno	ryear	(c) Iwo yea	IS DACK	(a) '	iiree ye	ars back	(e) rour	years back
1a	Beginning of year balance				<del></del>				<u> </u>		
b	Contributions							<u> </u>			
С	Net investment earnings, gains, and losses										
d	Grants or scholarships									-	
е	Other expenditures for facilities										
	and programs										
f	Administrative expenses				l I						
g	End of year balance .				<u> </u>					L	
2	Provide the estimated percentage of the curr	rent year end balanc		column (a	a)) held as:						
а	Board designated or quasi-endowment		_%								
b	Permanent endowment	%									
C	Temporarily restricted endowment ▶	%									
	The percentages in lines 2a, 2b, and 2c shou										
3a	Are there endowment funds not in the posse	ssion of the organiza	ation that a	re held a	nd administe	ered for t	he or	ganiza	ation	г	
	by:										Yes No
	(i) unrelated organizations					•••••	•••			3a(i)	_
	(ii) related organizations						•••			3a(ii)	
	If "Yes" to 3a(ii), are the related organizations	<u>=</u>								3b	
4 Doi	Describe in Part XIV the intended uses of the										-
Par	t VI Land, Buildings, and Equipm				1	4 > 4			<del></del>	(85)	<del></del>
	Description of property	(a) Cost or of basis (investing		• •	or other (other)		ccum precia	ulated	'	(d) Book	value
		Dasis (IIIVestii	ienų	Dasis (	(Other)	ue <sub>l</sub>	PICUE		+		
	Land							,	-		
	Buildings .			·	·				+		
C	Leasehold improvements				659,000.			100.0	<u></u>		559,000.
đ	Equipment				333,000.			100,0	<del></del>		333,000.
	Other  Add lines 1a through 1e. (Column (d) must e	aual Form 000 Port	Y column	(B) line 1	O(c) )				+		559,000.
TOTAL	- months is uncommitte assume an initial contraction of the contractio		rs. SANGISIII (	III ICT	WILLI.I						~ ~ ~ .

Schedule D (Form 990) 2011

98-0380092

TUBERCULOSIS AND MALARIA

Part VII Investments - Other Securities. Se	e Form 990, Part X, I	ne 12.		
(a) Description of security or category (including name of security)	(b) Book value	C	(c) Method of value ost or end-of-year ma	
(1) Financial derivatives				
(2) Closely-held equity interests				
(3) Other				
(A)				-
(B)				
(C)				
(D)				····
(E)				<u> </u>
(F)				
(G)				
(H)			· v ··	<del></del>
(1)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 12.)				
Part VIII Investments - Program Related. S	oo Form 000 Port V	lino 12		
		line 13.	(c) Method of value	etion:
(a) Description of investment type	(b) Book value	Cc	ost or end-of-year ma	
(1)				
(2)				
(3)				
(4)				·
(5)				
(6)				<del> </del>
(7)				
(9)				
(10)				
Total. (Col (b) must equal Form 990, Part X, col (B) line 13.)			_	
Part IX Other Assets. See Form 990, Part X, line				,
(a)	Description			(b) Book value
(1)				
(2)				
(3)				
(4)				
(5)				
(6)				
(7)				-
(8)				
(9)				
(10)				
Total. (Column (b) must equal Form 990, Part X, col (B) line	15.)		<b>•</b>	
Part X Other Liabilities. See Form 990, Part X,		<u> </u>		
1. (a) Description of liability		(b) Book value		
	i i	(b) book value		
(1) Federal income taxes		(b) Book Value	1	
(1) Federal income taxes		(b) Book Value		
(2)		(b) Book value		
(2)		(b) Book value		
(2) (3) (4)		(b) Book value		
(2) (3) (4) (5)		(b) Book value		
(2) (3) (4) (5) (6)		(b) Book value		
(2) (3) (4) (5) (6) (7)		(b) Book value		
(2) (3) (4) (5) (6) (7) (8)		(b) Book value		
(2) (3) (4) (5) (6) (7) (8) (9)		(b) Book value		
(2) (3) (4) (5) (6) (7) (8) (9)		(b) Book value		
(2) (3) (4) (5) (6) (7) (8) (9) (10)				
(2) (3) (4) (5) (6) (7) (8) (9) (10)	25.) The organization's innancial		nzation's liability for uncertain	r tax positions under
(2) (3) (4) (5) (6) (7) (8) (9) (10)	25.) Interpretation is innancial			n tax positions under

FORM 990 REVENUE ON PART VIII - 4,271,261,633

### SCHEDULE F (Form 990)

## Statement of Activities Outside the United States

► Complete if the organization answered "Yes" to Form 990, Part IV, line 14b, 15, or 16.

OMB No 1545-0047

Department of the Treasury Internal Revenue Service

Name of the organization

➤ Attach to Form 990. ➤ See separate instructions.

	Open to Public Inspection
Employer id	dentification number

THE GLOBAL FUND TO FIGHT AIDS, TUBERCULOSIS AND MALARIA 98-0380092 General Information on Activities Outside the United States. Complete if the organization answered "Yes" Part I to Form 990, Part IV, line 14b. For grantmakers. Does the organization maintain records to substantiate the amount of its grants and other assistance, X Yes No the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? For grantmakers. Describe in Part V the organization's procedures for monitoring the use of its grants and other assistance outside the United States 3 Activities per Region. (The following Part I, line 3 table can be duplicated if additional space is needed.) (c) Number of (e) If activity listed in (d) (f) Total (b) Number of (d) Activities conducted in region (a) Region expenditures employees (by type) (e.g., fundraising, program offices is a program service, agents, and for and describe specific type in the region services, investments, grants to ındependent investments contractors of service(s) in region recipients located in the region) in region in region GRANTS TO RECIPIENTS IN THE REGION 1,444,000,193. SUB-SAHARAN AFRICA GRANTS TO RECIPIENTS EAST ASIA & THE IN THE REGION 0 369,377,120. PACIFIC GRANTS TO RECIPIENTS IN THE REGION & AMPM COPAYMENTS 357,307,203. SOUTH ASIA RUSSIA AND THE NEWLY GRANTS TO RECIPIENTS IN THE REGION 209,361,784. INDEPENDENT STATES 0 GRANTS TO RECIPIENTS SOUTH AMERICA 0 IN THE REGION 183,166,512. GRANTS TO RECIPIENTS MIDDLE EAST AND 0 IN THE REGION 164,856,206. NORTH AFRICA ORGANIZATIONAL OPERATIONAL EXPENSES EUROPE (INCLUDING 612 OF THE SECRETARIAT HEADQUARTERS 307,776,400. ICELAND & GREENLAND) 612 3,035,845,418. 3 a Sub-total **b** Total from continuation ٥. 0 sheets to Part I c Totals (add lines 3a 612 3,035,845,418. and 3b)

98-0380092

TUBERCULOSIS AND MALARIA

Schedule F (Form 990) 2011

Part II Grants and Other Assistance to Organizations or Entities Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 15, for any recipient who received more than \$5,000. Check this box if no one recipient received more than \$5,000

Part II can be duplicated if additional space is needed.

Par II can be do	Part II can de duplicated it additional space is needed	space is needed.						
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
					PERFORMANCE			
					BASED FUNDING	-		
		LATIN AMERICA &	GRANTS TO RECIPIENTS		тнкоидн	_		
		THE CARIBBEAN	IN THE REGION	32,643.	TRUSTEE	•		
					PERFORMANCE			
					BASED FUNDING			
		EAST ASIA & THE	GRANTS TO RECIPIENTS		THROUGH	_		
		PACIFIC	IN THE REGION	42,967.	TRUSTEE	·		
					PERFORMANCE			
		SUB-SAHARAN			BASED FUNDING			
		AFRICA: SOUTHERN	GRANTS TO RECIPIENTS		гнкоисн			
		AFRICA	IN THE REGION	43,673.	TRUSTEE	0		
					PERFORMANCE			
		SUB-SAHARAN			BASED FUNDING			
-		AFRICA: WEST &	GRANTS TO RECIPIENTS		тнкоисн			
		CENTRAL AFRICA	IN THE REGION	86,135.	TRUSTEE	0		
					PERFORMANCE			
					BASED FUNDING			
			GRANTS TO RECIPIENTS		гнкоисн			
		SOUTH ASIA	IN THE REGION	93,922.	922. rrustee	0.		
					PERFORMANCE			
					BASED FUNDING			
		LATIN AMERICA &	GRANTS TO RECIPIENTS		THROUGH			
		THE CARIBBEAN	IN THE REGION	94,396.	TRUSTEE	0.		
					PERFORMANCE			
		SUB-SAHARAN			BASED FUNDING			
-		AFRICA: WEST &	GRANTS TO RECIPIENTS		гнкоисн			
		CENTRAL AFRICA	IN THE REGION	104,162.	TRUSTEE	0.		
					PERFORMANCE			
					BASED FUNDING			
		EASTERN EUROPE &	GRANTS TO RECIPIENTS		гнкоисн			
		CENTRAL ASIA	IN THE REGION	126,077. TRUSTEE	TRUSTEE	0.		
2 Enter total number of	f recipient organization	are listed above that are	Enter total number of reconnent organizations listed above that are recognized as charities by the foreign country recognized as tax-exempt by	foreign country	recognized as tax-ex	omnt hv		

<sup>2</sup> Enter total number of recipient organizations listed above that are recognized as charities by the foreign country, recognized as tax-exempt by the IRS, or for which the grantee or counsel has provided a section 501(c)(3) equivalency letter

Schedule F (Form 990) 2011

150

Enter total number of other organizations or entities က

THE GLOBAL FUND TO FIGHT AIDS, TUBERCULOSIS AND MALARIA

Schedule	r (Form 990)	COLUCIS AND MALAKIA	
Part il	Continuation of Grants and Oth	ther Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part	rt II, line 1)

		,																																				
Page 2		(i) Method of valuation (book, FMV, appraisal, other)																																				
	(	(h) Description of non-cash assistance																																				
92	90), Part II, line 1	(g) Amount of non-cash assistance				•				•		• •		0				.0				0.			٠	0.				0.				0				0
98-0380092	tities Outside the United States. (Schedule F (Form 990), Part II, line	(f) Manner of cash disbursement	DEBRORMANCE	BASED FUNDING	THROUGH	TRUSTEE	PERFORMANCE	BASED FUNDING	THROUGH	TRUSTEE	PERFORMANCE	BASED FUNDING	THROUGH	TRUSTEE	PERFORMANCE	BASED FUNDING	гнкоидн	TRUSTEE	PERFORMANCE	BASED FUNDING	THROUGH	TRUSTEE	PERFORMANCE	BASED FUNDING	THROUGH	TRUSTEE	PERFORMANCE	BASED FUNDING	THROUGH	TRUSTEE	PERFORMANCE	BASED FUNDING	THROUGH	TRUSTEE	PERFORMANCE	BASED FUNDING	THROUGH	TRUSTEE
	United States.	(e) Amount of cash grant				251,203.				274,837.				279,433.				340,904.				377,840.				493,032.				541,345.				544,385.				576,698.
		(d) Purpose of grant			GRANTS TO RECIPIENTS	IN THE REGION			GRANTS TO RECIPIENTS	IN THE REGION			GRANTS TO RECIPIENTS	IN THE REGION			GRANTS TO RECIPIENTS	IN THE REGION		·	GRANTS TO RECIPIENTS	IN THE REGION			GRANTS TO RECIPIENTS	IN THE REGION			GRANTS TO RECIPIENTS	IN THE REGION			GRANTS TO RECIPIENTS	IN THE REGION			GRANTS TO RECIPIENTS	IN THE REGION
TUBERCULOSIS AND MALARIA	Continuation of Grants and Other Assistance to Organizations or En	(c) Region			EASTERN EUROPE &	CENTRAL ASIA		SUB-SAHARAN	AFRICA: WEST &	CENTRAL AFRICA			EAST ASIA & THE	PACIFIC			ATIN AMERICA &	THE CARIBBEAN		SUB-SAHARAN	AFRICA: WEST &	CENTRAL AFRICA			LATIN AMERICA &	THE CARIBBEAN			LATIN AMERICA &	THE CARIBBEAN			LATIN AMERICA &	THE CARIBBEAN			EASTERN EUROPE &	CENTRAL ASIA
TUBERCUL	f Grants and Other	(b) IRS code section and EIN (if applicable)																																				
Schedule F (Form 990)	Part il Continuation o	t (a) Name of organization							<del></del> =															- ~														

TUBERCULOSIS AND MALARIA

Schedule F (Form 990)

Page 2

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valuation (book, FMV, appraisal, other) (I) Method of (h) Description of non-cash assistance Continuation of Grants and Other Assistance to Organizations or Entitles Outside the United States. (Schedule F (Form 990), Part II, line 1 0 。 ٥. 0 0 。 。 (g) Amount of Ö 0 assistance cash disbursement ASED FUNDING ASED FUNDING ASED FUNDING SASED FUNDING SASED FUNDING SASED FUNDING SASED FUNDING ASED FUNDING ASED FUNDING (f) Manner of ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE HROUGH TRUSTEE TRUSTEE HROUGH 700,000 PRUSTEE HROUGH 773,405. PRUSTEE HROUGH TRUSTEE HROUGH TRUSTEE HROUGH FRUSTEE HROUGH TRUSTEE HROUGH THROUGH 902,438, PRUSTEE 653,636. 847,513. 694,936. 797,196. 832,916. 877,275. of cash grant (e) Amount GRANTS TO RECIPIENTS GRANTS TO RECIPIENTS GRANTS TO RECIPIENTS RANTS TO RECIPIENTS GRANTS TO RECIPIENTS (d) Purpose of grant IN THE REGION EASTERN EUROPE & EASTERN EUROPE & LATIN AMERICA & LATIN AMERICA & LATIN AMERICA & LATIN AMERICA & SAST ASIA & THE LATIN AMERICA & THE CARIBBEAN THE CARIBBEAN THE CARIBBEAN THE CARIBBEAN HE CARIBBEAN (c) Region ENTRAL ASIA ENTRAL ASIA SOUTH ASIA ACIFIC (b) IRS code section and EIN (if applicable) (a) Name of organization Part II

THE GLOBAL FUND TO FIGHT AIL TUBERCULOSIS AND MALARIA

Schedule F (Form 990)

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valuation (book, FMV, appraisal, other) (I) Method of (h) Description of non-cash assistance Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1) 。 ö ö ö ö 。 。 . 。 (g) Amount of non-cash assistance cash disbursement ASED FUNDING SASED FUNDING ASED FUNDING ASED FUNDING MASED FUNDING ASED FUNDING ASED FUNDING ASED FUNDING ASED FUNDING (f) Manner of ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE 971,895, TRUSTEE TRUSTEE HROUGH HROUGH TRUSTEE HROUGH 1,075,667. PRUSTEE TRUSTEE HROUGH 'HROUGH HROUGH 1,310,862. TRUSTEE 1,318,779. PRUSTEE HROUGH FRUSTEE HROUGH HROUGH 1,363,700. PRUSTEE 1,007,521. 1,152,796, of cash grant 1,166,528. 1,235,539, (e) Amount GRANTS TO RECIPIENTS BRANTS TO RECIPIENTS GRANTS TO RECIPIENTS GRANTS TO RECIPIENTS GRANTS TO RECIPIENTS GRANTS TO RECIPIENTS SRANTS TO RECIPIENTS GRANTS TO RECIPIENTS GRANTS TO RECIPIENTS (d) Purpose of IN THE REGION EASTERN EUROPE & AFRICA: SOUTHERN AFRICA: SOUTHERN LATIN AMERICA & AST ASIA & THE THE MIDDLE EAST WORTH AFRICA & AFRICA: WEST & ENTRAL AFRICA THE CARIBBEAN (c) Region ENTRAL ASIA FRICA: EAST FRICA: EAST UB-SAHARAN UB-SAHARAN UB-SAHARAN UB-SAHARAN UB-SAHARAN ACIFIC AFRICA AFRICA AFRICA AFRICA (b) IRS code section and EIN (if applicable) (a) Name of organization PartII

THE GLOBAL FUND TO FIGHT AIDS, TUBERCULOSIS AND MALARIA

Page 2		(i) Method of valuation (book, FMV, appraisal, other)																			_																	
	(	(h) Description of non-cash assistance																									:								<del>.</del>			
92	90), Part II, line	(g) Amount of non-cash assistance				0.				0.				0.				0.				0.				0.				0.				0.				0.
98-0380092	Schedule F (Form S	(f) Manner of cash disbursement	PERFORMANCE	SASED FUNDING	rhrough	TRUSTEE	PERFORMANCE	BASED FUNDING	THROUGH	TRUSTEE	PERFORMANCE	BASED FUNDING	гнкоидн	RUSTEE	PERFORMANCE	BASED FUNDING	THROUGH	TRUSTEE	PERFORMANCE	BASED FUNDING	гнкопдн	TRUSTEE	PERFORMANCE	BASED FUNDING	THROUGH	TRUSTEE	PERFORMANCE	SASED FUNDING	THROUGH	TRUSTEE	PERFORMANCE	SASED FUNDING	PHROUGH	TRUSTEE	PERFORMANCE	SASED FUNDING	FHROUGH	FRUSTEE
	United States. (	(e) Amount of cash grant		, M		1,372,457.	a e			1,384,586.		<u> </u>		1,491,878. TRUSTEE				1,542,703.				1,572,869.				1,810,159.				1,849,239.				1,877,652.				2,133,697. TRUSTEE
, 2710	tions or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)	(d) Purpose of grant			GRANTS TO RECIPIENTS	IN THE REGION	1		GRANTS TO RECIPIENTS	IN THE REGION			GRANTS TO RECIPIENTS	IN THE REGION			GRANTS TO RECIPIENTS	IN THE REGION			GRANTS TO RECIPIENTS	IN THE REGION			GRANTS TO RECIPIENTS	IN THE REGION			GRANTS TO RECIPIENTS	IN THE REGION			GRANTS TO RECIPIENTS	IN THE REGION			GRANTS TO RECIPIENTS	IN THE REGION
OSIS AND MALARIA	Continuation of Grants and Other Assistance to Organizations	(c) Region			SOUTHERN	AFRICA				SOUTH ASIA			LATIN AMERICA &	THE CARIBBEAN			LATIN AMERICA &	THE CARIBBEAN		SUB-SAHARAN	AFRICA: SOUTHERN	AFRICA		SUB-SAHARAN	AFRICA: EAST	AFRICA			NORTH AFRICA &	THE MIDDLE EAST			LATIN AMERICA &	THE CARIBBEAN			LATIN AMERICA &	THE CARIBBEAN
TUBERCUL	Grants and Other	(b) IRS code section and EIN (if applicable)																																				
Schedule F (Form 990)	Part II Continuation of	1 (a) Name of organization																																				

THE GLUBAL FUND TO FIGHT A TUBERCULOSIS AND MALARIA

Schedule F (Form 990)

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valuation (book, FMV, appraisal, other) (i) Method of (h) Description of non-cash assistance Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1) ٥. ٥. ٥. ö ٥. ٥. ٥. 0 ö (g) Amount of non-cash assistance cash disbursement SASED FUNDING ASED FUNDING ASED FUNDING ASED FUNDING ASED FUNDING ASED FUNDING ASED FUNDING SASED FUNDING SASED FUNDING (f) Manner of PERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE THROUGH 2,424,207. PRUSTEE HROUGH 2,258,173. FRUSTEE 2,306,087. PRUSTEE 2,362,630. PRUSTEE HROUGH 2,384,205. TRUSTEE HROUGH TRUSTEE TRUSTEE 2,826,912. PRUSTEE 3,028,264. FRUSTEE HROUGH HROUGH HROUGH HROUGH HROUGH 2,665,588. of cash grant 2,770,351 (e) Amount GRANTS TO RECIPIENTS GRANTS TO RECIPIENTS BRANTS TO RECIPIENTS SRANTS TO RECIPIENTS SRANTS TO RECIPIENTS GRANTS TO RECIPIENTS BRANTS TO RECIPIENTS BRANTS TO RECIPIENTS GRANTS TO RECIPIENTS (d) Purpose of grant IN THE REGION EASTERN EUROPE & SASTERN EUROPE & LATIN AMERICA & ATIN AMERICA & ATIN AMERICA & THE MIDDLE EAST AFRICA: WEST & WORTH AFRICA & ENTRAL AFRICA THE CARIBBEAN THE CARIBBEAN THE CARIBBEAN (c) Region AFRICA: EAST ENTRAL ASIA ENTRAL ASIA UB-SAHARAN UB-SAHARAN SOUTH ASIA AFRICA (b) IRS code section and EIN (if applicable) (a) Name of organization Part II

THE GLOBAL FUND TO FIGHT AIDS, TUBERCULOSIS AND MALARIA

Schedule F (Form 990)	TUBERCUI	TUBERCULOSIS AND MALARIA			98-0380092	92		Page 2
Part II Continuation or	f Grants and Other	Assistance to Organiza	Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1)	United States.	(Schedule F (Form 9	90), Part II, line 1	(	
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
					PERFORMANCE			
					BASED FUNDING			
		LATIN AMERICA & THE CARIBBEAN	GRANTS TO RECIPIENTS IN THE REGION	3,112,034.	TRUSTEE	0.		
					PERFORMANCE			
		SUB-SAHARAN			BASED FUNDING			
a saabhal		AFRICA: EAST	GRANTS TO RECIPIENTS		THROUGH			
		AFRICA	IN THE REGION	3,225,981.	TRUSTEE	0		
					PERFORMANCE			
					BASED FUNDING			
***************************************		NORTH APRICA &	GRANTS TO RECIPIENTS		THROUGH			
		THE MIDDLE EAST	IN THE REGION	3,305,815.	TRUSTEE	.0		
					PERFORMANCE			
					BASED FUNDING			
		LATIN AMERICA &	GRANTS TO RECIPIENTS		THROUGH			
-		THE CARIBBEAN	IN THE REGION	3,380,957.	TRUSTEE	.0		
					PERFORMANCE			
					BASED FUNDING			
		LATIN AMERICA &	GRANTS TO RECIPIENTS		тнкоисн			
		THE CARIBBEAN	IN THE REGION	3,865,798.	TRUSTEE	0.		
					PERFORMANCE			
					BASED FUNDING			
		NORTH AFRICA &	GRANTS TO RECIPIENTS		гнкопдн			
		THE MIDDLE EAST	IN THE REGION	3,935,788.	TRUSTEE	0.		
					PERFORMANCE			
					BASED FUNDING			
		EASTERN EUROPE &	GRANTS TO RECIPIENTS		THROUGH			
		CENTRAL ASIA	IN THE REGION	4,185,686.	TRUSTEE	0.		
					PERFORMANCE			
					BASED FUNDING			
-			GRANTS TO RECIPIENTS		THROUGH			
		SOUTH ASIA	IN THE REGION	4,280,347.		0.		
					PERFORMANCE			
					BASED FUNDING			
		EAST ASIA & THE	GRANTS TO RECIPIENTS		THROUGH			
		PACIFIC	IN THE REGION	4,313,946. FRUSTEE	TRUSTEE	0		

THE GLOBAL FUND TO FIGHT AN TUBERCULOSIS AND MALARIA

Schedule F (Form 990)

Page 2

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valuation (book, FMV, appraisal, other) (i) Method of (h) Description of non-cash assistance Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1) 0 ö ο. ٥. Ö ö ٥. ö ö (g) Amount of non-cash assistance cash disbursement ASED FUNDING ASED FUNDING SASED FUNDING SASED FUNDING SASED FUNDING ASED FUNDING MASED FUNDING SASED FUNDING ASED FUNDING (f) Manner of ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE 4,344,113. PRUSTEE HROUGH 4,363,234. FRUSTEE HROUGH 4,487,963. TRUSTEE HROUGH TRUSTEE HROUGH TRUSTEE HROUGH TRUSTEE 5,080,078, PRUSTEE HROUGH FRUSTEE HROUGH HROUGH TROUGH 5,170,665. PRUSTEE 4,762,711. 4,934,925 5,155,287. of cash grant 4,909,564. (e) Amount SRANTS TO RECIPIENTS GRANTS TO RECIPIENTS GRANTS TO RECIPIENTS GRANTS TO RECIPIENTS GRANTS TO RECIPIENTS BRANTS TO RECIPIENTS SRANTS TO RECIPIENTS GRANTS TO RECIPIENTS GRANTS TO RECIPIENTS (d) Purpose of grant IN THE REGION IN THE REGION IN THE REGION N THE REGION IN THE REGION LATIN AMERICA & LATIN AMERICA & HE MIDDLE EAST EAST ASIA & THE ORTH AFRICA & THE CARIBBEAN THE CARIBBEAN (c) Region FRICA: EAST AFRICA: EAST UB-SAHARAN JUB-SAHARAN OUTH ASIA SOUTH ASIA SOUTH ASIA ACIFIC AFRICA AFRICA (b) IRS code section and EIN (if applicable) (a) Name of organization Part II

TUBERCULOSIS AND MALARIA

Schedule F (Form 990)

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(i) Method of valuation (book, FMV, appraisal, other) Page 2 (h) Description of non-cash assistance Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1 。 。 。 。 ö . 。 ö ö (g) Amount of non-cash assistance cash disbursement ASED FUNDING ASED FUNDING SASED FUNDING ASED FUNDING ASED FUNDING ASED FUNDING ASED FUNDING ASED FUNDING ASED FUNDING (f) Manner of ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE HROUGH 5,298,327. PRUSTEE HROUGH 5,451,900. PRUSTEE HROUGH 5,617,241. FRUSTEE 6,010,654.prustee HROUGH HROUGH FRUSTEE HROUGH 6,261,877. PRUSTEE HROUGH 6,312,078. PRUSTEE HROUGH FRUSTEE HROUGH 6,366,128. TRUSTEE of cash grant 6,085,519. 6,038,017 (e) Amount BRANTS TO RECIPIENTS GRANTS TO RECIPIENTS GRANTS TO RECIPIENTS GRANTS TO RECIPIENTS PRANTS TO RECIPIENTS GRANTS TO RECIPIENTS BRANTS TO RECIPIENTS GRANTS TO RECIPIENTS SRANTS TO RECIPIENTS (d) Purpose of grant N THE REGION N THE REGION IN THE REGION N THE REGION N THE REGION IN THE REGION N THE REGION IN THE REGION IN THE REGION AFRICA: SOUTHERN SAST ASIA & THE SAST ASIA & THE EAST ASIA & THE (c) Region AFRICA: EAST VFRICA: EAST AFRICA: EAST JUB-SAHARAN JUB-SAHARAN UB-SAHARAN JUB-SAHARAN SOUTH ASIA SOUTH ASIA PACIFIC ACIFIC ACIFIC APRICA AFRICA AFRICA AFRICA (b) IRS code section and EIN (if applicable) (a) Name of organization Part II

THE GLOBAL FUND TO FIGHT AIDS,
TUBERCULOSIS AND MALARIA

<u>"</u>	TUBERCUI	TUBERCULOSIS AND MALARIA	,		98-0380092	92		Page 2
Part II Continuation o	f Grants and Other	Continuation of Grants and Other Assistance to Organizations or	ations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1	United States.	(Schedule F (Form 9)	90), Part II, line 1		
1 (a) Name of organization	(b) IRS code section and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(I) Method of valuation (book, FMV, appraisal, other)
					PERFORMANCE			
					BASED FUNDING			
		EAST ASIA & THE			тнкоцсн			
		PACIFIC	IN THE REGION	6,534,029.	TRUSTEE	0.		
					PERFORMANCE			
					BASED FUNDING			
		EAST ASIA & THE	GRANTS TO RECIPIENTS		THROUGH	٠		
		PACIFIC	IN THE REGION	6,662,711.	TRUSTEE	0.		
-					PERFORMANCE			
		SUB-SAHARAN			BASED FUNDING			
		AFRICA: WEST &	GRANTS TO RECIPIENTS		тнкоисн			
		CENTRAL AFRICA	IN THE REGION	6,708,478.	TRUSTEE	0		
					PERFORMANCE			
					BASED FUNDING			
<b>.</b>		LATIN AMERICA &	GRANTS TO RECIPIENTS		THROUGH			
		THE CARIBBEAN	IN THE REGION	6,864,284.	TRUSTEE	.0		
					PERFORMANCE			
-					BASED FUNDING			
		EAST ASIA & THE	GRANTS TO RECIPIENTS		гнкоисн			
		PACIFIC	IN THE REGION	6,910,086.	TRUSTEE	0		
					PERFORMANCE			
		SUB-SAHARAN			BASED FUNDING	-		
		AFRICA: WEST &	GRANTS TO RECIPIENTS		тнкоисн			
		CENTRAL AFRICA	IN THE REGION	7,305,907.	TRUSTEE	0		
~					PERFORMANCE			
					BASED FUNDING			
		NORTH AFRICA &	GRANTS TO RECIPIENTS		THROUGH			
		THE MIDDLE EAST	IN THE REGION	7,450,636.	TRUSTEE	0		
					PERFORMANCE			
		SUB-SAHARAN			BASED FUNDING			
		AFRICA: WEST &	GRANTS TO RECIPIENTS		тнкоисн			
-		CENTRAL AFRICA	IN THE REGION	7,709,085.	TRUSTEE	0		
					PERFORMANCE			
		SUB-SAHARAN			BASED FUNDING			_
		AFRICA: EAST	GRANTS TO RECIPIENTS		тнкоисн			
		AFRICA	IN THE REGION	7,720,888. PRUSTEE	TRUSTEE	0.		

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Page 2

(i) Method of valuation (book, FMV, appraisal, other) (h) Description of non-cash assistance Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1) 。 0 ٥. (g) Amount of 0 ö 。 0 ö Ö non-cash assistance 98-0380092 cash disbursement ASED FUNDING ASED FUNDING ASED FUNDING ASED FUNDING SASED FUNDING SASED FUNDING SASED FUNDING SASED FUNDING ASED FUNDING (f) Manner of ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE 7,883,539. RRUSTEE TRUSTEE TRUSTEE 8,322,125. FRUSTEE HROUGH TRUSTEE HROUGH TRUSTEE HROUGH 9,373,267. FRUSTEE HROUGH HROUGH 'HROUGH RUSTEE HROUGH 9,681,757, PRUSTEE HROUGH HROUGH 7,947,761. 8,728,341. 8,774,256. 8,132,382. of cash grant 8,774,643, (e) Amount GRANTS TO RECIPIENTS GRANTS TO RECIPIENTS GRANTS TO RECIPIENTS SRANTS TO RECIPIENTS GRANTS TO RECIPIENTS SRANTS TO RECIPIENTS GRANTS TO RECIPIENTS BRANTS TO RECIPIENTS SRANTS TO RECIPIENTS (d) Purpose of grant IN THE REGION IN THE REGION N THE REGION IN THE REGION EASTERN EUROPE & EASTERN EUROPE & AFRICA: SOUTHERN LATIN AMERICA & AFRICA: WEST & CENTRAL APRICA THE CARIBBEAN (c) Region CENTRAL ASIA CENTRAL ASIA AFRICA: EAST AFRICA: EAST AFRICA: EAST SUB-SAHARAN SUB-SAHARAN SUB-SAHARAN UB-SAHARAN SUB-SAHARAN SOUTH ASIA AFR CA AFRICA AFRICA AFRICA (b) IRS code section and EIN (if applicable) (a) Name of organization Schedule F (Form 990) Part II

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Schedule F (Form 990)

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(i) Method of valuation (book, FMV, appraisal, other) (h) Description of non-cash assistance Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1) 0 。 。 ٥. 。 。 ö 。 。 (g) Amount of non-cash assistance cash disbursement SASED FUNDING ASED FUNDING ASED FUNDING ASED FUNDING MASED FUNDING ASED FUNDING ASED FUNDING ASED FUNDING ASED FUNDING (f) Manner of ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE PERFORMANCE ERFORMANCE HROUGH 13,932,460. PRUSTEE HROUGH HROUGH 10,029,731, TRUSTEE HROUGH 10,745,575. TRUSTEE 11,222,249. PRUSTEE HROUGH 11,372,748. FRUSTEE HROUGH 12,725,763, PRUSTEE 13,608,944. TRUSTEE 14,011,678, FRUSTEE HROUGH HROUGH FRUSTEE HROUGH 13,177,987. of cash grant (e) Amount GRANTS TO RECIPIENTS GRANTS TO RECIPIENTS GRANTS TO RECIPIENTS RANTS TO RECIPIENTS GRANTS TO RECIPIENTS SRANTS TO RECIPIENTS GRANTS TO RECIPIENTS BRANTS TO RECIPIENTS GRANTS TO RECIPIENTS (d) Purpose of grant IN THE REGION N THE REGION IN THE REGION IN THE REGION APRICA: SOUTHERN ATIN AMERICA & BAST ASIA & THE EAST ASIA & THE THE MIDDLE EAST NORTH AFRICA & THE CARIBBEAN (c) Region AFRICA: EAST AFRICA: EAST AFRICA: EAST UB-SAHARAN UB-SAHARAN SUB-SAHARAN 3UB-SAHARAN SOUTH ASIA PACIFIC ACIFIC AFRICA AFRICA AFRICA AFRICA (b) IRS code section and EIN (if applicable) (a) Name of organization Part II

THE GLOBAL FUND TO FIGHT AIDS, TUBERCULOSIS AND MALARIA

Schedule F (Form 990)		TUBERCULOSIS AND MALARIA	,		98-0380092	19.2		Page 2
Part II Continuati	Continuation of Grants and Other Assistance to Organizations or	Assistance to Organiza	ations or Entities Outside the United States, (Schedule F (Form 990), Part II, line 1)	United States.	(Schedule F (Form 9	90), Part II, line 1	(	
1 (a) Name of organization	tion and EIN (if applicable)	(c) Region	(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(I) Method of valuation (book, FMV, appraisal, other)
					PERFORMANCE			
					BASED FUNDING			
		NORTH AFRICA &	NTS		rhrough			
		THE MIDDLE EAST	IN THE REGION	14,498,072.	TRUSTEE	0.		
					PERFORMANCE			
					BASED FUNDING			
			GRANTS TO RECIPIENTS		THROUGH			
		SOUTH ASIA	IN THE REGION	14,554,536.	TRUSTEE	.0		
					PERFORMANCE			
					BASED FUNDING			
		LATIN AMERICA &	GRANTS TO RECIPIENTS		гнкоисн			
		THE CARIBBEAN	IN THE REGION	15,106,476.	TRUSTEE	0		
					PERFORMANCE			
<del>-</del>					BASED FUNDING			
		NORTH AFRICA &	GRANTS TO RECIPIENTS		гнкоисн			
		THE MIDDLE EAST	IN THE REGION	15,642,967.	TRUSTEE	0.		
					PERFORMANCE			
		SUB-SAHARAN			BASED FUNDING			
		AFRICA: EAST	GRANTS TO RECIPIENTS		THROUGH			
		AFRICA	IN THE REGION	15,669,289.	TRUSTEE	0		
					PERFORMANCE			
		Æ			BASED FUNDING			
		AFRICA: SOUTHERN	GRANTS TO RECIPIENTS		гнкоисн			
		AFRICA	IN THE REGION	16,169,384.	TRUSTEE	0		
					PERFORMANCE			
-		SUB-SAHARAN			BASED FUNDING			
					гнкоисн			
		CENTRAL AFRICA	IN THE REGION	16,897,326.	TRUSTEE	0.		
					PERFORMANCE			
					BASED FUNDING			
~		NORTH AFRICA &	GRANTS TO RECIPIENTS		THROUGH			
		THE MIDDLE EAST	IN THE REGION	16,918,724.	TRUSTEE	0		
					PERFORMANCE			
		SUB-SAHARAN		_	BASED FUNDING			
		AFRICA: EAST			гнкоисн			
		AFRICA	IN THE REGION	17,359,084. PRUSTEE	TRUSTEE	0.		

Schedule F (Form 990) TUBERCULOSIS AND MALARIA

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aluation (book, FMV, appraisal, other) (i) Method of (h) Description of non-cash assistance Continuation of Grants and Other Assistance to Organizations or Entitles Outside the United States. (Schedule F (Form 990), Part II, line 1) 0 0 0 。 0 。 ö (g) Amount of ٥. ٥. assistance non-cash cash disbursement ASED FUNDING SASED FUNDING ASED FUNDING SASED FUNDING SASED FUNDING ASED FUNDING ASED FUNDING ASED FUNDING ASED FUNDING (f) Manner of ERFORMANCE ERFORMANCE ERFORMANCE PERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE 18,363,387. TRUSTEE 20,737,722. PRUSTEE HROUGH 21,045,046. PRUSTEE HROUGH 23, 226, 400, PRUSTEE HROUGH TRUSTEE HROUGH TRUSTEE 26,035,326. TRUSTEE HROUGH TRUSTEE THROUGH HROUGH HROUGH HROUGH 26,693,383. TRUSTEE 26,000,465. 26,640,257. of cash grant 25,681,367 (e) Amount GRANTS TO RECIPIENTS (d) Purpose of grant IN THE REGION EASTERN EUROPE & EASTERN EUROPE & EASTERN EUROPE & THE MIDDLE EAST EAST ASIA & THE EAST ASIA & THE THE MIDDLE EAST THE MIDDLE EAST ORTH AFRICA & AFRICA: WEST & WORTH AFRICA & NORTH AFRICA & ENTRAL AFRICA (c) Region SENTRAL ASIA SENTRAL ASIA CENTRAL ASIA UB-SAHARAN ACIFIC PACIFIC (b) IRS code section and EIN (if applicable) (a) Name of organization Part II

THE GLOBAL FUND TO FIGHT AIDS, TUBERCULOSIS AND MALARIA

Colored   Colo	Schedule F (Form 990) Part II Continuation of	TUBERCUI	(Form 990) TUBERCULOSIS AND MALARIA Continuation of Grants and Other Assistance to Organizations or	ations or Entitles Outside the United States.	United States,	98-0380 Schedule F (Form	990), Part II, line 1)		Page 2
HARAM  HARAM  HARAM  HARAM  HARAI  HARAM  HARAN  HARAM  HARAN  HARAM  HA	2 E	RS code section IN (if applicable)		(d) Purpose of grant	(e) Amount of cash grant	(f) Manner of cash disbursement	(g) Amount of non-cash assistance	(h) Description of non-cash assistance	(i) Method of valuation (book, FMV, appraisal, other)
HARAN  HARAN  WEST & SRANTS TO RECIPIENTS  WEST & SRANTS TO RECIPIENTS  SOUTHERN  HARAN  SOUTHERN  HARAN  SOUTHERN  HARAN  APRICA  HARAN  APRICA  HARAN  APRICA  HARAN  SOUTHERN  HARAN  SOUTHERN  HARAN  SOUTHERN  HARAN  SOUTHERN  HARAN  SOUTHERN  HARAN  SASA  HARAN  SASA  HARAN  SASA  SAS			SUB-SAHARAN			PERFORMANCE BASED FUNDING			
IN THE REGION 26,946,022, PRUSTEE  RAMN  WEST & SHANTS TO RECIPIENTS 26,939,110, PRUSTEE  RARN  RANTS TO RECIPIENTS 27,295,783, PRUSTEE  RARN  RASHICA IN THE REGION 27,295,783, PRUSTEE  RARNS TO RECIPIENTS 27,295,783, PRUSTEE  RARNTS TO RECIPIENTS 28,725,300, PRUSTEE  RARNTS TO RECIPIENTS 28,725,300, PRUSTEE  RARNTS TO RECIPIENTS 28,725,300, PRUSTEE  RARNTS TO RECIPIENTS 29,203,469, PRUSTEE  RARNTS TO RECIPIENTS 29,203,469, PRUSTEE  RANTS TO RECIPIENTS 29,203,469, PRUSTEE  RANTS TO RECIPIENTS 29,203,469, PRUSTEE  RANTS TO RECIPIENTS 29,203,469, PRUSTEE  RARNTS TO RECIPIENTS 29,203,469, PRUSTEE  RARNTS TO RECIPIENTS 29,203,469, PRUSTEE  RAST SHANTS TO RECIPIENTS 34,278,652, PRUSTEE  RAST SHANTS TO RECIPIENTS 34,378,645, PRUSTEE  RAST SHANTS TO RECIPIENTS 38,443,645, PRUSTEE  RAST SHANTS TO RECIPIENTS 38,443,645, PRUSTEE  RAST RANTS TO RECIPIENTS 38,443,645, PRUSTEE  RAST RASION 38,443,645, PRUSTEE  RAST RANTS TO RECIPIENTS 38,443,645, PRUSTEE  RAST RASION 38,443,645, PRUSTEE  RAST RANTS TO RECIPIENTS 38,443,645, PRUSTEE  RAST RASION 38,443,645, PRUSTEE  RAST RAS			AFRICA: EAST			гнкоидн			
THERN HEANTS TO RECIPIENTS  THERN HEANTS TO RECIPIENTS  THE GRANTS TO RECIPIENTS  THE OGG THE NOUGH  THE REGION			AFRICA		26,846,022.		0		
HERN GRANTS TO RECIPIENTS  THEOUGH THERN GRANTS TO RECIPIENTS  THEOUGH IN THE REGION  THE GRANTS TO RECIPIENTS  THEOUGH THROUGH THROUG						PERFORMANCE			
TE STANTS TO RECIPIENTS  ICA IN THE REGION  THERN  SAANTS TO RECIPIENTS  THROUGH  IN THE REGION  THE BABD FUNDING  THROUGH  THROU			SUB-SAHARAN			BASED FUNDING			
THERN SRANTS TO RECIPIENTS  THE REGION  TH			AFRICA: WEST &			тнкоидн	<u></u>		
THERN GRANTS TO RECIPIENTS  IN THE REGION  THE GRANTS TO RECIPIENTS  THE OBJOING  THE REGION  A 14,278,652,783,783,783,783,783,783,783,783,783,783	- 1		CENTRAL AFRICA		939,	TRUSTEE	0		
THERN SRANTS TO RECIPIENTS  THE STANTS TO RE						PERFORMANCE			
THERN CHANTS TO RECIPIENTS  TAROUGH  IN THE REGION  THE CANTES  BASED FUNDING  BASED FUNDING  THROUGH			SUB-SAHARAN			BASED FUNDING			
IN THE REGION  I. & GRANTS TO RECIPIENTS  THE GRANTS TO RECIPIENTS  THROUGH  THE REGION  THE REGION  A 14,278,652, TRUSTEE  BASED FUNDING  THROUGH  THE REGION  A 34,278,652, TRUSTEE  BASED FUNDING  THROUGH  THE REGION  A 18,096,680, TRUSTEE  BASED FUNDING  THROUGH			••			THROUGH			
THE GRANTS TO RECIPIENTS  THE ABOUT THE REGION  A IN THE REGION  A IN THE REGION  THROUGH	- k		AFRICA		27,295,783.	TRUSTEE	0.		
HASED FUNDING THE REGION  THE REGION  THE BANTS TO RECIPIENTS  THE BRANTS TO RECIPIENTS  THE GRANTS TO RECIPIENTS  THE GRANTS TO RECIPIENTS  THE GRANTS TO RECIPIENTS  THE GRANTS TO RECIPIENTS  A IN THE REGION  THE REGION  A IN THE REGION  THE REG						PERFORMANCE			
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THE GRANTS TO RECIPIENTS  A IN THE REGION  THE CONDING THROUGH  THROUGH			AFRICA: WEST &			гнкоидн	_		
THE GRANTS TO RECIPIENTS  A IN THE REGION  THE REGION  THE GRANTS TO RECIPIENTS  A IN THE REGION  THE REGI			CENTRAL AFRICA		,725,	TRUSTEE	0		
THE GRANTS TO RECIPIENTS  IN THE REGION  THE GRANTS TO RECIPIENTS  THE GRANTS TO RECIPIENTS  A IN THE REGION  THE GRANTS TO RECIPIENTS  A IN THE REGION  THE REGION  THE GRANTS TO RECIPIENTS  A IN THE REGION  TH		-				PERFORMANCE			
THE GRANTS TO RECIPIENTS  IN THE REGION  THE GRANTS TO RECIPIENTS  IN THE REGION  OPE & GRANTS TO RECIPIENTS  A IN THE REGION  THE REGION  THE REGION  A SAANTS TO RECIPIENTS  THROUGH  PERFORMANCE  BASED FUNDING  PERFORMANCE  BASED FUNDING  THROUGH  THE REGION  THE GRANTS TO RECIPIENTS  THROUGH						BASED FUNDING	-		
THE GRANTS TO RECIPIENTS  THE GRANTS TO RECIPIENTS  THROUGH  IN THE REGION  A 18,096,680, FRUSTEE  BASED FUNDING  THROUGH						THROUGH			
THE GRANTS TO RECIPIENTS  THE GRANTS TO RECIPIENTS  THROUGH  THROUGH  BASED FUNDING  BASED FUNDING  THROUGH			PACIFIC	1	29,203,469.	TRUSTEE	0.		
THE GRANTS TO RECIPIENTS  IN THE REGION  SA, 278, 652, TRUSTEE  PERFORMANCE  BASED FUNDING  THROUGH  THROUGH  A IN THE REGION  THROUGH  BASED FUNDING  PERFORMANCE  BASED FUNDING  PERFORMANCE  BASED FUNDING  PERFORMANCE  BASED FUNDING  THROUGH  THE REGION  THE REGION  THE REGION  THE GRANTS TO RECIPIENTS  THE GRANTS TO RECIPIENTS  THROUGH  THE GRANTS TO RECIPIENTS  THROUGH  THROUGH  THROUGH  THROUGH  THROUGH  THROUGH						PERFORMANCE			
THE GRANTS TO RECIPIENTS  IN THE REGION  SA, 278, 652, TRUSTEE  PERFORMANCE  BASED FUNDING  THROUGH  THROUGH  SRANTS TO RECIPIENTS  IN THE REGION  THROUGH  BASED FUNDING  PERFORMANCE  BASED FUNDING  THROUGH  THROUGH  THROUGH  THE STANTS TO RECIPIENTS  THROUGH  THROUGH  THE GRANTS TO RECIPIENTS  THROUGH  THROUGH  THROUGH  THROUGH  THROUGH  THROUGH  THROUGH  THROUGH						BASED FUNDING			
IN THE REGION 34,278,652, FRUSTEE  PERFORMANCE BASED FUNDING THROUGH THROUGH A IN THE REGION 38,096,680, FRUSTEE BASED FUNDING FERFORMANCE BASED FUNDING THROUGH IN THE REGION 38,443,645, FRUSTEE FERFORMANCE BASED FUNDING THE GRANTS TO RECIPIENTS			ᄲ			THROUGH			
DPE & GRANTS TO RECIPIENTS  A IN THE REGION  IN THE REGION  THE OWN THE REGION  THE REGION  THE OWN THE REGION  THE GRANTS TO RECIPIENTS  THROUGH  THE OWN THE REGION  THE OWN THE			PACIFIC		34,278,652.	TRUSTEE	0		
DYPE & GRANTS TO RECIPIENTS  A IN THE REGION  I SRANTS TO RECIPIENTS  THROUGH  PERFORMANCE  BASED FUNDING  THROUGH  IN THE REGION  38,443,645, IRUSTEE  PERFORMANCE  PERFORMANCE  PERFORMANCE  BASED FUNDING  THE GRANTS TO RECIPIENTS  THE GRANTS TO RECIPIENTS  THROUGH  THROUGH						PERFORMANCE			
A IN THE REGION 38,096,680, FRUSTEE  IN THE REGION 38,096,680, FRUSTEE  BASED FUNDING  THROUGH  IN THE REGION 38,443,645, FRUSTEE  PERFORMANCE  BASED FUNDING  THE GRANTS TO RECIPIENTS  THE GRANTS TO RECIPIENTS  THROUGH  THE GRANTS TO RECIPIENTS  THROUGH						BASED FUNDING			
THE GRANTS TO RECIPIENTS  THROUGH						THROUGH			
T GRANTS TO RECIPIENTS  IN THE REGION  THE GRANTS TO RECIPIENTS  RA43,645, IRUSTEE  PERPORMANCE  RASED FUNDING  THE GRANTS TO RECIPIENTS  THROUGH			CENTRAL ASIA		38,096,680.	TRUSTEE	•		
I SRANTS TO RECIPIENTS IN THE REGION  38,443,645, FRUSTEE PERFORMANCE BASED FUNDING THE SRANTS TO RECIPIENTS THE STANTS TO RECIPIENTS						PERFORMANCE			
EAST GRANTS TO RECIPIENTS  18,443,645, FRUSTEE  IN THE REGION  18,443,645, FRUSTEE  PERFORMANCE  BASED FUNDING  IA & THE GRANTS TO RECIPIENTS			SUB-SAHARAN			BASED FUNDING			
IN THE REGION 38,443,645. IRUSTEE PERFORMANCE BASED FUNDING IA & THE GRANTS TO RECIPIENTS						THROUGH			
PERFORMANCE BASED FUNDING IA & THE GRANTS TO RECIPIENTS THROUGH			AFRICA			TRUSTEE	.0		
IA & THE GRANTS TO RECIPIENTS						PERFORMANCE			
IA & THE GRANTS TO RECIPIENTS						BASED FUNDING			
			생		20 00	THROUGH	•		

THE GLOBAL FUND TO FIGHT AIDS, TUBERCULOSIS AND MALARIA

Page 2		t of (h) Description (i) Method of of non-cash valuation (book, FMV, appraisal, other)			0.				0.				0.				0.				0.				0.				0			0				•
98-0380092	(Schedule F (Form 990), Part II, line 1)	(f) Manner of non-cash cash disbursement assistance	PERFORMANCE BASED FUNDING	тнкоисн	TRUSTEE	PERFORMANCE	BASED FUNDING	гнкоисн		PERFORMANCE	BASED FUNDING	THROUGH	TRUSTEE	PERFORMANCE	BASED FUNDING	гнкоисн	TRUSTEE	PERFORMANCE	BASED FUNDING	гнкоисн	TRUSTEE	PERFORMANCE	BASED FUNDING	тнкоисн		PERFORMANCE	BASED FUNDING	гнкоидн	TRUSTEE	PERFORMANCE RASED FINDING	HELLOHAL		-	PERFORMANCE BASED EINDING	THROUGH	B B B B B B B B B B B B B B B B B B B
	e United States.	(e) Amount of cash grant			43,614,677.				44,624,621.				53,102,758.				56,576,039.	-			57,278,527.				65,174,746.				75,410,807.			84 554 432				05 350 361
ALUS,	tions or Entities Outside the United States.				IN THE REGION			GRANTS TO RECIPIENTS	IN THE REGION			GRANTS TO RECIPIENTS	IN THE REGION			GRANTS TO RECIPIENTS	IN THE REGION			GRANTS TO RECIPIENTS	IN THE REGION			GRANTS TO RECIPIENTS	IN THE REGION				IN THE REGION		SHNAIGIJAA OH SHNEAD				STATE OF STATES	
IS AND MALARIA	Continuation of Grants and Other Assistance to Organizations or	(c) Region		EUROPE &	CENTRAL ASIA			us	THE CARIBBEAN			EAST ASIA & THE	PACIFIC		SUB-SAHARAN	AFRICA: EAST	AFRICA			EASTERN EUROPE &	CENTRAL ASIA		SUB-SAHARAN	AFRICA: EAST	AFRICA		Œ	AFRICA: SOUTHERN	AFRICA	STIR-SAHARAN	TABLE TABLE		ni ni ca	Negenes gils	AFRICA SOUTHERN	
TUBERCULOS	Grants and Other	(b) IRS code section and EIN (if applicable)																																		
Schedule F (Form 990)	Part II Continuation of	(a) Name of organization																					-								~					

THE GLOBAL FUND TO FIGHT AIDS,

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Schedule F (Form 990)

98-0380092

valuation (book, FMV, appraisal, other) (i) Method of (h) Description of non-cash assistance Part II Continuation of Grants and Other Assistance to Organizations or Entities Outside the United States. (Schedule F (Form 990), Part II, line 1) 0 0 ٠. ö 。 °. ö (g) Amount of non-cash assistance cash disbursement ASED FUNDING SASED FUNDING ASED FUNDING ASED FUNDING ASED FUNDING ASED FUNDING SASED FUNDING (f) Manner of ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE ERFORMANCE HROUGH 102,135,557, PRUSTEE HROUGH .02,745,745, rruster HROUGH .03,222,862. TRUSTEE HROUGH TRUSTEE 198,703,321. TRUSTEE HROUGH 95,392,188, TRUSTEE HROUGH TRUSTEE HROUGH 98,732,424. .09,429,870. of cash grant (e) Amount GRANTS TO RECIPIENTS GRANTS TO RECIPIENTS GRANTS TO RECIPIENTS SRANTS TO RECIPIENTS RANTS TO RECIPIENTS GRANTS TO RECIPIENTS GRANTS TO RECIPIENTS (d) Purpose of grant IN THE REGION EASTERN EUROPE & LATIN AMERICA & LATIN AMERICA & EAST ASIA & THE THE CARIBBEAN THE CARIBBEAN (c) Region ENTRAL ASIA FRICA: EAST FRICA: EAST JUB-SAHARAN UB-SAHARAN SOUTH ASIA PACIFIC AFRICA AFRICA (b) IRS code section and EIN (if applicable) (a) Name of organization

THE GLOBAL FUND TO FIGHT AIDS,

TUBERCULOSIS AND MALARIA

Schedule F (Form 990) 2011 TUBERCULOSIS AND MALARIA

Partills Grants and Other Assistance to Individuals Outside the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 16.

Page 3

98-0380092

Part III can be duplicated if additional space is needed.

(h) Method of valuation (book, FMV, appraisal, other)						Schedule F (Form 990) 2011
(g) Description of non-cash assistance						Schedu
(f) Amount of non-cash assistance	_					
(e) Manner of cash disbursement						
(d) Amount of cash grant						
c) Number of recipients						
(b) Region						
(a) Type of grant or assistance (b) Region						

for Form 5713)

TUBERCULOSIS AND MALARIA

Page 4 Rart∛IV/ Foreign Forms Was the organization a U.S. transferor of property to a foreign corporation during the tax year? If "Yes," the organization may be required to file Form 926, Return by a U.S. Transferor of Property to a Foreign Yes X No Corporation (see Instructions for Form 926) Did the organization have an interest in a foreign trust during the tax year? If "Yes," the organization 2 may be required to file Form 3520, Annual Return to Report Transactions with Foreign Trusts and Receipt of Certain Foreign Gifts, and/or Form 3520-A, Annual Information Return of Foreign Trust With a U.S. Owner (see Instructions for Forms 3520 and 3520-A) Did the organization have an ownership interest in a foreign corporation during the tax year? If "Yes," 3 the organization may be required to file Form 5471, Information Return of U.S. Persons With Respect To X Yes No Certain Foreign Corporations. (see Instructions for Form 5471) Was the organization a direct or indirect shareholder of a passive foreign investment company or a qualified electing fund dunng the tax year? If "Yes," the organization may be required to file Form 8621, Information Return by a Shareholder of a Passive Foreign Investment Company or Qualified Electing Fund. Yes X No (see Instructions for Form 8621) Did the organization have an ownership interest in a foreign partnership during the tax year? If "Yes," 5 the organization may be required to file Form 8865, Return of U.S. Persons With Respect To Certain Yes X No Foreign Partnerships. (see Instructions for Form 8865) Did the organization have any operations in or related to any boycotting countries during the tax year? If 6 "Yes," the organization may be required to file Form 5713, International Boycott Report (see Instructions

Schedule F (Form 990) 2011

☐ Yes

X No

Schedule F (Form 990) 2011 TUBERCULOSIS AND MALARIA

Supplemental Information
Complete this part to provide the information required by Part I, line 2 (monitoring of funds); Part I, line 3, column (f) (accounting method;
amounts of investments vs expenditures per region); Part II, line 1 (accounting method); Part III (accounting method); and Part III, column
(c) (estimated number of recipients), as applicable. Also complete this part to provide any additional information.
SCHEDULE F, PART I, LINE 2: ALL GRANT FUNDS OF THE GLOBAL FUND ARE
THE CAN AND THE U.S. THE CLOSE THE DOLLOWS DEPOSITIONS IN SEC.
DISBURSED OUTSIDE THE US. THE GLOBAL FUND FOLLOWS PERFORMANCE BASED
FUNDING WHEREIN FURTHER DISBURSEMENTS TO THE PRINCIPAL RECIPIENT ARE
DETERMINED BASED ON THE PROJECT REPORTS AND CASH REQUESTS THAT ARE
REVIEWED AND APPROVED BY THE FUND PORTFOLIO STAFF BASED ON THE
RECOMMENDATION OF THE LOCAL FUND AGENTS (LFA). DEPENDING UPON THE RISK
ASSESSMENT AND PROJECT STATUS, LFA MAY BE REQUESTED TO UNDERTAKE SPECIFIC
IN-COUNTRY MONITORING ACTIVITIES.
PART IV, LINE 3
THE GLOBAL FUND IS NOT A U.S. PERSON AND THEREFORE IS
NOT REQUIRED TO FILE FORM 5471 TO REPORT OWNERSHIP OF FOREIGN
CORPORATIONS
CORPORATIONS.

## SCHEDULE J (Form 990)

**Compensation Information** 

For certain Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

► Complete if the organization answered "Yes" to Form 990, Part IV, line 23.

ZU I I

Open to Public Inspection

OMB No 1545-0047

Name of the organization

Department of the Treasury

► Attach to Form 990. ► See separate instructions.

THE GLOBAL FUND TO FIGHT AIDS,

TUBERCULOSIS AND MALARIA

Employer identification number 98-0380092

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990,			
	Part VII, Section A, line 1a. Complete Part III to provide any relevant information regarding these items.			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence			
	Tax indemnification and gross up payments  Health or social club dues or initiation fees			
	Discretionary spending account Personal services (e.g., maid, chauffeur, chef)			1
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or		l	١,
_	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation pnor to reimbursing or allowing expenses incurred by all officers, directors,			
	trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2		
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's	ļ		
•	CEO/Executive Director. Check all that apply. Do not check any boxes for methods used by a related organization to			
	establish compensation of the CEO/Executive Director. Explain in Part III.	ł	ŀ	
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			
	Form 990 of other organizations  X Approval by the board or compensation committee			
	——————————————————————————————————————			ļ
4	Dunng the year, did any person listed in Form 990, Part VII, Section A, line 1a, with respect to the filing	l i		
•	organization or a related organization:			
а		4a	X	
b		4b		х
	Participate in, or receive payment from, an equity-based compensation arrangement?	4c		х
ŭ	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III.			
	The totally of miles to persons and provide the approved and approved to the control of the cont			
	Only section 501(c)(3) and 501(c)(4) organizations must complete lines 5-9.			
5	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			ĺ
	contingent on the revenues of:			İ
a	The organization?	5a		х
b	Any related organization?	5b		х
_	If "Yes" to line 5a or 5b, describe in Part III.			
6	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of.		_	1
а		6a		х
b	Any related organization?	6b		Х
	If "Yes" to line 6a or 6b, describe in Part III.			
7			-	
	not described in lines 5 and 6? If "Yes," describe in Part III	7		x
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
-	initial contract exception described in Regulations section 53.4958-4(a)(3)? If "Yes," describe in Part III	8		х
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in			
	Regulations section 53.4958-6(c)?	9		

Schedule J (Form 990) 2011 TUBERCULOSIS AND MALARIA 98-0180092 Afficers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii). Do not list any individuals that are not listed on Form 990, Part VII.

98-0380092

		(B) Breakdown of W-2 and	V-2 and/or 1099-MISC	SC compensation	(0)	(Q)	(E)	(F)
(A) Name		(I) Base compensation	(ii) Bonus & incentive compensation	(III) Other reportable compensation	neurement and other deferred compensation	Nontaxable benefits	(B)(i)-(D)	Compensation reported as deferred in prior Form 990
	Ξ	265,606.	0	0	49,660.	138,529.	453,795.	0.
1 ZUBAIR SHEIKH HASSAN	(E)	0	0	0	0	0	0	0
	Ξ	173,199.	0	0	32,184.	232,795.	438,178.	0
2 MARK EDINGTON	(II)	0.	0.	0	.0	0	0	0
	(1)	311,858.	.0	0.	61,592.	12,647.	386,097.	0
3 DR MICHEL KAZATCHKINE	(ii)	0.	.0	0	.0	0	0	
	(i)	261,603.	0	0	43,963.	52,755.	358,321.	0
4 DAVID CURRY	](ii)	0.	0	0.	.0	0	0	0
	(i)	218,701.	.0	0.	41,870.	331,343.	591,914.	0
5 HEATHER ALLAN	(ii)	0.	0	0	.0	0	0	0
	(1)	275,861.	0	0	52,715.	133,097.	461,673.	0
6 RIFAT ATUN	(ii)	0.	0	0	.0	0	0	0
	(1)	331,201.	0	0	63,477.	44,505.	439,183.	0
7 DR DEBREWORK ZEWDIE	(11)	0.	0	0.	.0	0.	0	0
	Ξ	261,133.	0.	0.	48,532.	102,847.	412,512.	0
8 GULEN NEWTON	⊞	0.	0.	0.	0.	0	0	0
	Ξ	417,998.	0.	0.	52,272.	43,416.	513,686.	0
9 JOSE-MARIA DE HEREDIA	▣	0.	0	0.	0.	0.	0.	0
	Ξ	274,097.	.0	0.	51,297.	98,827.	424,221.	0
10 DR OLUSOJI ADEYI	▣	0.	0.	0.	0.	0.	0	0.
	Ξ	251,453.	0	0.	47,525.	122,582.	421,560.	0
11 DR ELMAR VINH-THOMAS	▣	0	0.	0.	0.	0.	0.	
	Ξ	267,136.	0.	0.	49,812.	77,504.	394,452.	
12 STEFAN EMBLAD	⊞	0.	0.	0.	0.	0.	.0	0
	Ξ	240,879.	0.	0.	47,480.	98,985.	387,344.	0
13 DHARSHANA DE MEL	▣	0	0.	0.	0.	0.	0.	0
	Ξ							
14	₿							
	Ξ							
15	▤							
	Ξ							
16	▣							

Schedule J (Form 990) 2011

Page 3

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II. Also complete this part for any additional information. Schedule J (Form 990) 2011
[Parxill] Supplemental Information

PART I, LINE 4A: JOSE-MARIA DE HEREDIA RECEIVED A SEVERANCE PAYMENT OF	
\$139,333,	
Schedule J (Form 990) 2011	orm 990) 2011

## SCHEDULE O (Form 990 or 990-EZ)

## Supplemental Information to Form 990 or 990-EZ

(Form 990 or 990-EZ)

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

2011

2011

Openito Publication Inspection

Name of the organization

THE GLOBAL FUND TO FIGHT AIDS,

Employer identification number 98-0380092

TUBERCULOSIS AND MALARIA	98-0380092
FORM 990, PART I, ITEM K, OTHER ORGANIZATION TYPE:	
PSF PRIVATE SWISS FOUNDATION	
FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:	
NON-PROFIT FOUNDATION THAT WAS INCORPORATED IN GENEVA, SWITZERLAND ON	
JANUARY 22, 2002. THE GLOBAL FUND'S PURPOSE IS TO ATTRACT, MANAGE AND	
DISBURSE ADDITIONAL RESOURCES THROUGH A NEW PUBLIC-PRIVATE PARTNERSHIP	
THAT WILL MAKE A SUSTAINABLE AND SIGNIFICANT CONTRIBUTION TO THE	
REDUCTION OF INFECTIONS, ILLNESS AND DEATH, THEREBY MITIGATING THE	
IMPACT CAUSED BY HIV/AIDS, TUBERCULOSIS (TB) AND MALARIA IN COUNTRIES	
IN NEED, AND CONTRIBUTING TO POVERTY REDUCTION AS PART OF THE	
MILLENNIUM DEVELOPMENT GOALS.	
FORM 990, PART I, LINE 5 & PART V, LINES 1A & 2A	
THE REPORTING ORGANIZATION IS A FOREIGN ENTITY OPERATING OUTSIDE THE	
UNITED STATES AND THEREFORE DOES NOT HAVE A REQUIREMENT TO FILE FORM	
W-3 OR FORM 1096 TO REPORT EMPLOYEE OR INDEPENDENT CONTRACTOR	
COMPENSATION. THE GLOBAL FUND EMPLOYED 612 INDIVIDUALS DURING 2011.	*****
<del></del>	
<del></del>	
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:	
BY HIV/AIDS, TUBERCULOSIS (TB) AND MALARIA IN COUNTRIES IN NEED, AND	
CONTRIBUTING TO POVERTY REDUCTION AS PART OF THE MILLENNIUM DEVELOPMENT	
GOALS.	
<del></del>	

Schedule O (Form 990 or 990-EZ) (2011)  Name of the organization THE GLOBAL FUND TO FIGHT AIDS,	Employer identification number
TUBERCULOSIS AND MALARIA	Employer identification number 98-0380092
THE BOARD IN NOVEMBER 2011 INCLUDED THE FOLLOWING CHANGES: 1) THE REVISION	
OF THE BYLAWS; 2) THE REVISION OF THE BOARD AND COMMITTEE OPERATING	
PROCEDURES; AND 3) THE ESTABLISHMENT OF THREE NEW STANDING COMMITTEES OF	
THE BOARD AND A COORDINATING GROUP UNDER NEW CHARTERS.	
THE BYLAWS WERE REVISED TO REFLECT THE ESTABLISHMENT AND ROLE OF THE THREE	
NEW STANDING COMMITTEES OF THE BOARD: 1) THE STRATEGY, INVESTMENT AND	
NAW STANDING COMMITTING OF THE BOLDS. 27 THE DITCHEST, INCOME.	
IMPACT COMMITTEE (THE "SIIC"); 2) THE FINANCE AND OPERATIONAL PERFORMANCE	
COMMITTEE (THE "FOPC"); 3) THE AUDIT AND ETHICS COMMITTEE (THE "AEC"); AND	
4) A COORDINATING GROUP COMPRISED OF THE BOARD CHAIR AND VICE CHAIR ALONG	<u></u>
WITH THE CHAIR AND VICE-CHAIR OF EACH STANDING COMMITTEE. ADDITIONALLY, THE	
ROLES AND RESPONSIBILITIES OF THE VARIOUS GOVERNANCE, ADVISORY AND	
ADMINISTRATIVE BODIES OF THE GLOBAL FUND HAVE BEEN UPDATED.	
THE NEW BOARD AND COMMITTEE OPERATING PROCEDURES REPRESENT A CONSOLIDATION	
OF RULES AND PROCEDURES FOR BOTH THE BOARD AND ITS COMMITTEES THAT HAD	
PREVIOUSLY BEEN CAPTURED IN VARIOUS DOCUMENTS. ADDITIONALLY, PRACTICES HAVE	***************************************
BEEN HARMONIZED FOR CONSISTENCY AT THE BOARD AND COMMITTEE LEVEL. ALSO, AN	
ANDREW MO MUR DOCUMENT LICER BOARD AND COMMITTEE MEMBER DOLER	
ANNEX TO THE DOCUMENT LISTS BOARD AND COMMITTEE MEMBER ROLES,	
RESPONSIBILITIES AND COMPETENCIES.	1000,000
THE GOVERNANCE REFORM AIMED TO ESTABLISH NEW COMMITTEES, EACH WITH CLEAR	
AND DISTINCT ROLES IN THE GOVERNANCE OF THE ORGANIZATION. TO DO SO, THE	
BOARD ESTABLISHED THREE NEW COMMITTEES TO REPLACE ITS PREVIOUS STANDING	
COMMITTEES. RESPONSIBILITIES AND ROLES WERE REASSIGNED AND REALLOCATED	
AMONG THE THREE NEW COMMITTEES - THE SIIC, FOPC AND AEC. EACH OF THE	
COMMITTEES NOW OPERATE UNDER A CHARTER THAT DEFINES THE COMMITTEES' ROLES	
AND RESPONSIBILITIES. ADDITIONALLY, A COORDINATING GROUP COMPRISED OF THE	
132212 01-23-12	Schedule O (Form 990 or 990-EZ) (2011)

Schedule O (Form 990 or 990-Ez) (2011)	Page 2
Name of the organization THE GLOBAL FUND TO FIGHT AIDS, TUBERCULOSIS AND MALARIA	Employer identification number 98-0380092
CHAIR AND VICE-CHAIR OF THE BOARD AND EACH COMMITTEE WAS CREATED UNDER A	
NEW CHARTER TO COORDINATE AND FACILITATE COMMUNICATION BETWEEN THE	
COMMITTEES.	
COMMITTED.	
ALL OF THESE CORE GOVERNANCE DOCUMENTS ARE AVAILABLE ON THE GLOBAL FUND'S	
PUBLIC WEBSITE.	
	<u>-</u>
FORM 990, PART VI, SECTION A, LINE 5: IN ACCORDANCE WITH ITS GENERAL	
POLICY ON TRANSPARENCY, THE GLOBAL FUND REPORTED IN 2011 FINDINGS BY ITS	
OFFICE OF THE INSPECTOR GENERAL (OIG) OF EVIDENCE OF MISUSE OR	<del>,</del>
UNSUBSTANTIATED SPENDING OF GRANT FUNDS BY GRANTEES IN SEVERAL COUNTRIES.	
THESE AMOUNTS TOTALED US\$ 43 MILLION. AFTER FINDINGS WERE PUBLISHED IN	
JANUARY 2011, THE GLOBAL FUND BOARD COMMISSIONED A HIGH-LEVEL INDEPENDENT	
PANEL TO REVIEW THE GLOBAL FUND'S FINANCIAL CONTROLS AND OVERSIGHT	
FUNCTIONS. BASED ON THE RECOMMENDATIONS OF THIS HIGH-LEVEL PANEL, THE	
GLOBAL FUND ADOPTED AND EMBARKED UPON A CONSOLIDATED TRANSFORMATION PLAN TO	
ADDRESS WEAKNESSES AND FORTIFY STRENGTHS IN ITS OPERATIONS, RISK MANAGEMENT	
AND FIDUCIARY CONTROLS. ONGOING EFFORTS HAVE CONTINUED TO STRUCTURE	
OPERATIONAL TEAMS IN A MANNER TO BEST EMBED RISK MANAGEMENT AND FIDUCIARY	
CONTROLS THROUGHOUT GRANT PROGRAMS.	
FORM 990, PART VI, SECTION B, LINE 11: THE FORM IS FILLED BY THE CHIEF	
ACCOUNTANT WITH THE ASSISTANCE OF US BASED TAX ADVISOR WHICH IS THEN	
REVIEWED FOR ACCURACY BY THE FINANCIAL CONTROLLER.	1.00
FORM 990, PART VI, SECTION B, LINE 12C: THE POLICY ON ETHICS AND CONFLICTS	
OF INTEREST FOR GLOBAL FUND INSTITUTIONS APPLIES TO ALL MEMBERS OF THE	
BOARD, ALTERNATES, MEMBERS OF BOARD COMMITTEES, TASK FORCES, THE TECHNICAL	

FORM 990, PART IX, LINE 11C

Schedule O (Form 990 or 990-EZ) (2011)  Name of the organization THE GLOBAL FUND TO FIGHT AIDS,	Employer identification number
TUBERCULOSIS AND MALARIA	98-0380092
THE ORGANIZATION HAD IN-HOUSE ACCOUNTING STAFF HENCE NO EXTERNAL	
CONSULTANTS WERE ENGAGED.	
FORM 990, PART IX, LINE 24A	
FEES PAID TO LOCAL FUND AGENTS TO ASSESS LOCAL CAPACITY PRIOR TO AND	
DURING GRANT NEGOTIATION, AND TO MANAGE AND MONITOR IMPLEMENTATION OF	
FUNDED PROGRAMS AS GRANTS ARE DISBURSED, ARE EXPENSED AS THE WORK IS	
PERFORMED.	
FORM 990, PART XI, LINE 5, CHANGES IN NET ASSETS:	· · · · · · · · · · · · · · · · · · ·
UNREALIZED FOREIGN EXCHANGE LOSSES ON ASSETS INCLUDING	
INVESTMENTS -89,751,461.	
FORM 990, PART XII, LINE 2B	
THE ORGANIZATION'S FINANCIAL STATEMENTS ARE AUDITED IN ACCORDANCE WITH	
INTERNATIONAL FINANCIAL REPORTING STANDARDS (IFRS).	
and the second s	N- 41
	-
	<u></u>